ACCESS, 236 East 6th Avenue . Tallahassee, Florida 32303 INC. P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666 CERTIFIED COPY (CORPORATE NAME & DOCUMENT #) (CORPORATE NAME & DOCUMENT #) (CORPORATE NAME & DOCUMENT #) ****125.00 ****125.00 (CORPORATE NAME & DOCUMENT #) (CORPORATE NAME & DOCUMENT #) (CORPORATE NAME & DOCUMENT#) (CORPORATE NAME & DOCUMENT #)

(CORPORATE NAME & DOCUMENT #)

10.) (CORPORATE NAME & DOCUMENT #)

SPECIAL INSTRUCTIONS_



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

May 31, 2001

CORPORATE ACCESS, INC.

SUBJECT: FUQUA AVIATION, L.L.C.

Ref. Number: W01000012318

We have received your document for FUQUA AVIATION, L.L.C. and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following:

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence, which usually consists of a single sheet of paper and clearly reflects the entity is avalid entity in its home state/country. You can obtain the certificate of existence from the same office that provided you with the certified copy.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6025.

Trevor Brumbley Document Specialist

Letter Number: 001A00033020

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

| <u> </u> | EVICUMENTO TRANSACT BUSINESS IN THE STATE OF FLORIDA: FULL OF ANY OF A STATE OF FLORIDA: | |
|--|--|---|
| * ************************************ | Fugua Ariation L.L.C. (Name of foreign librited liability company) | |
| (Jurisdiction 11 | Tex as 3. 75-2939237 maker this law of which foreign limited liability (FE) number, if applicable) | |
| company is on | garized) | |
| · | (Osce of Organization) 5. Perpetual (Duration: Year limited liability company exist or "perpetual") | |
| | | |
| | (Date first transacted business in Flurida. (See sections 608.501, 608.502, and 817.155, F.S. | |
| | (Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S. | |
| | 20 Texas Blvd | ************************************** |
| 70 | Karkana, Tie 75503 (Street address of principal office) | |
| THE PERSON NAMED IN COLUMN TWO IS NOT THE OWNER. | (Street address of principal office) | |
| If limited ! | iability company is a manager-managed company, check here | |
| | | |
| The name | and usual business addresses of the managing members or managers are as fol | lows: |
| | Thomas N. Fugua Jr | |
| | 3720 Texas Blud | |
| - | | |
| | Texarkana Tr 75503 | |
| | · | |
| | | - |
|). Attached is a | n original continuate of existence, no more than 90 days old, duly authenticated by the official law? | igestedy aftermis in |
| | afor the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a fixely certificate under outh of the translatur must be submitted.) | en language, a |
| ALTERIOR OF CIT. | | • |
| l. Nature of | business or purposes to be conducted or promoted in Florida: | ig Company |
| | | |
| ***** | | *************************************** |
| | AL AL | |
| | Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes | |
| | an affirmation under the penalties of penjuly that the facts stated herein are true.) | |
| | Thomas H. Fugua Tr. | £ 23.3€ 0 |
| | Typed or printed name of signee | LA CIR |
| | | 受し (単) |

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

| FUQUA AVIATION, LLC | | | |
|--|----------------------|-------------------------|--|
| 2. The name and the Florida street addre | ss of the registered | l agent and office are: | |
| LAMAR GAY | | | |
| | (Name) | | |
| 633 TIMBERLANE ROA | VD. | | |
| Florida street a | address (P.O. Box NC | DT ACCEPTABLE) | |
| TALLAHASSEE | FL | 32312 | |
| | City/State/Zip |) | |

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

(Signature)

1. The name of the Limited Liability Company is:

\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)



The State of Texas

SECRETARY OF STATE

IT IS HEREBY CERTIFIED that Articles of Organization of

FUQUA AVIATION, L.L.C. File No. 7087074-22

were filed in this office and a certificate of organization was issued to this limited liability company, and no certificate of dissolution is in effect and the company is currently in existence.



IN TESTIMONY WHEREOF, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on May 31, 2061.

Henry Cuellar BAM Secretary of State I JUN-I ATTI: 3

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