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TRANSMITTAL LETTER

SUBJECT:	IVORY AIR, LLC
	(Name of Limited Liability Company)
	n Limited Liability Company for Authorization to Transact Business in d check are submitted to register the above referenced foreign limited s in Florida.
Please return all correspondence con-	cerning this matter to the following:
	LOUIS M. MEINERS, JR. (Name of Person)
	ADVOCATE CONSULTING
	(Firm/Company)
	9229 DELEGATES ROW, SUITE 245
	(Address)
	(Address) INDIANAPOLIS, IN 46240 (City/State and Zip Code)
For further information concerning the	nis matter, please call:
YOLANDA ROBINSON	at (317) 581-4077
(Name of Perso	n) (Area Code & Daytime Telephone Number)
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following	g amount:
	0.00 Filing Fee & Status Status Status Status Status Status Status Status Certified Copy

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1.	IVORY AIR, LLC				
	(Name of Foreign Li	mited	Liability Company)		
2.	DELAWARE	3.	20-3333964		
	(Jurisdiction under the law of which foreign limited liability company is organized)		(FEI number, if app	licable)	
4.	AUGUST 19, 2005	5.	PERPETUAL		
	(Date of Organization)		(Duration: Year limited liability com or "perpetual")	pany will ce	ase to exist
6.	8/22/05				
	(Date first transacted business (See sections 608.501 & 608.50	in F 2 F.S	orida, if prior to registration.) . to determine penalty liability)		
7.	120 S. MONROE STREET		<u> </u>		
	TALLAHASSEE, FL 32301				
	(Street Address	of P	rincipal Office)		
R	If limited liability company is a manager-managed c	om:	nany chack hara		
٥.	ii iiiiitee naonity company is a manager-managed c	omi	any, thete		
9.	The name and usual business address of the managing	ıg n	embers or managers are as follo	ows: 글었	95
	PALM AIR, LLC				SUN
			<u> </u>		73
	120 S. MONROE STREET			<u>_</u>	9 [
	TALLAHASSEE, FL 32301			38	<u>5</u>
		•		27	5
iav f tl	Attached is an original certificate of existence, no ming custody of records in the jurisdiction under the law ne certificate is in a foreign language, a translation mitted.)	ofv	which it is organized. (A photoco	py is not ac	cceptable.
11.	Nature of business or purposes to be conducted or pr	om.	oted in Florida:		
	EQUIPMENT LEASING				
	Signature of a member of an author (In accordance with section 608.408(3), F.S., an affirmation under the penalties of perjury to LOUIS M. MEINERS, JR.	rize the ex hat th	d representative of a member. ecution of this document constitutes e facts stated herein are true.)		,
	Typed or printed	nan	ne of signee		

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.

1. The name	of the Limited Liability (Company is:	
IVORY AIR	, LLC		
2. The name	and the Florida street add	dress of the registered agent and office are:	
	LOUIS M. MEIN	ERS, JR.	
		(Name)	
	2640 GOLDEN G	ATE PARKWAY, SUITE 205	
	Floric	da Street Address (P.O. Box NOT ACCEPTABLE)	
	NAPLES	FL 34105 City/State/Zip	FILED 05 AUG 29 PI SECUL SEED IRLU/HI SEED
company at the agree to act in and complete registered age	ne place designated in thi n this capacity. I further a performance of my dutie	nt and to accept service of process for the about is certificate, I hereby accept the appointment agree to comply with the provisions of all states, and I am familiar with and accept the obliquer 608, Florida Statutes.	ove stated limited Hability t as registered agent and tutes relating to the proper

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)



PAGE :

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I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "IVORY AIR, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE NINETEENTH DAY OF AUGUST, A.D. 2005.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "IVORY AIR, LLC" WAS FORMED ON THE NINETEENTH DAY OF AUGUST, A.D. 2005.

Warriet Smith Windson Secretary of State

AUTHENTICATION: 4105445

DATE: 08-19-05

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