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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : A 1 A CORPORATE SERVICES, INC.

AND THE RESIDENCE OF THE PROPERTY OF THE PROPE

Account Number : I20010000247 Phone : (800)494-3124

Fax Number : (305) 675-2811

FOREIGN LIMITED LIABILITY COMPANY

ULTIMATE AVIATION, L.L.C.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

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

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APIGANCE LA MILIANIA CONTRA	(Name of foreign limited	lability compar	(y)	- <del>1</del>	<del>~~~</del>
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01/24/2005		ERPETUAL			3/2
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	UPON QUALIFI				
(Date first transacted busi	ness in Florids. (See sectio	ms 608,501, 608	.502, and \$17.155	, F.S.)	
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	Clinton, UT 8	4015			
	(Street address of prin	icipal office)	<del>- u</del>		
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	resses of the managing	members or	managers are a	s follows:	
MANAGING MEMBER:	resses of the managing			,	
MANAGING MEMBER: MANDY HAMMANS				,	
he name and usual business addi MANAGING MEMBER: MANDY HAMMANS MANAGING MEMBER: JOHN HAMMANS		N, STE 201	Clinton, UT	84016	
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## 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:	2005
ULTIMATE AVIATION, L.L.C.	150
2. The name and the Florida street address of the registered agent and office are:	TAHASSI
A1A REGISTERED AGENT INC.	一
(Name)	
92 SADBERRY ROAD	SO A STATE OF THE PERSON OF TH
Florida street address (P.O. Box NOT ACCEPTABLE)	<del></del>
QUINCY FL 32351	
(City/State/Zip)	<del></del> -

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.

J9 Ly
(Signature)

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## **Utah Department of Commerce**

Division of Corporations & Commercial Code 168 East 398 South, 2nd Floor, PO Box 146705 Salt Lake Chy, UT 84114-6705 Service Center: (801) 530-4849 Tall Free: (877) 526-3994 Utah Residents Fax: (801) 530-6432

Web Site: http://www.commerce.utah.gov

10/12/2005 5820467-016010122005-454360

## CERTIFICATE OF EXISTENCE

Registration Number:

5820467-0160

Business Name:

ULTIMATE AVIATION, L.L.C.

Registered Date:

January 24, 2005

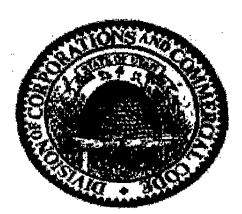
Entity Type:

Limited Liability Company

**Current Status:** 

Good Standing

The Division of Corporations and Commercial Code of the State of Utah, custodian of the records of business registrations, certifies that the business entity on this certificate is authorized to transact business and was duly registered under the laws of the State of Utah. The Division also certifies that this entity has paid all fees and penalties owed to this state; its most recent annual report has been filed by the Division; and, that Articles of Dissolution have not been filed.



Harry Bury

Kathy Berg Director

Division of Corporations and Commercial Code