

MD50000006490

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer

SBM

Office Use Only



900081247799

10/27/06--01060--004 **25.00

FILED

06 OCT 27 AM 11:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: KINGFISHER III AVIATION, L.C.
(Name of Foreign Limited Liability Company)

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

LOUIS M. MEINERS, JR.
(Name of Person)

ADVOCATE CONSULTING
(Firm/Company)

3073 HORSESHOE DRIVE SOUTH, SUITE 210
(Address)

NAPLES, FL 34104
(City/State and Zip Code)

For further information concerning this matter, please call:

RACHEL HALL at (888) 325-1942
(Name of Person) (Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

- ☒ \$25 Filing Fee ☐ \$30 Filing Fee & Certificate of Status ☐ \$55 Filing Fee & Certified Copy ☐ \$60 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO
FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO
TRANSACTION BUSINESS IN FLORIDA**

SECTION I (1-3 must be completed)

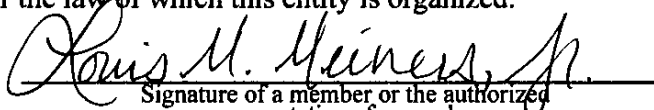
1. Name of limited liability company as it appears on the records of the Florida Department of State: KINGFISHER III AVIATION, L.C.
2. Jurisdiction of its organization: IOWA
3. Date authorized to do business in Florida: 11/18/2005

SECTION II (4-7 complete only the applicable changes)

4. If the amendment changes the name of the limited liability company, when was change effected under the laws of its jurisdiction of organization? _____
5. New name of the limited liability company: _____
6. If the amendment changes the period of duration, indicate new period of duration: _____
7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction: _____
8. If the amendment corrects any false statement, indicate the statement being corrected and the correction: THE MEMBER WAS LISTED INCORRECTLY ON THE FOREIGN LLC

APPLICATION, THE CORRECT MEMBER IS VIKTOR MAISTER.

9. Attached is an original certificate, no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.


Signature of a member or the authorized representative of a member

LOUIS M. MEINERS, JR. - AUTHORIZED REPRESENTATIVE

Typed or printed name of signee

Filing Fee: \$25.00

FILED
06 OCT 27 AM 11:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Date: 10/24/2006

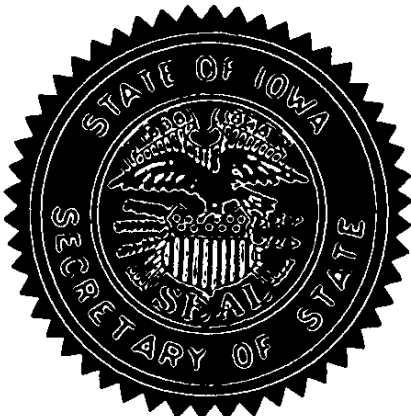
SECRETARY OF STATE

490DLC-000269501
KINGFISHER III AVIATION, L.C.
ADVOCATE CONSULTING
R. HALL
3073 HORSESHOE DR S STE 210
NAPLES, FL 34104

CERTIFICATE OF EXISTENCE

Name: KINGFISHER III AVIATION, L.C.
Date of Organization: 09/04/2002
Duration: PERPETUAL

I, CHESTER J. CULVER, Secretary of State of the State of Iowa, custodian of the records of limited liability companies, certify that the limited liability company named on this certificate was duly organized under the laws of Iowa on the date printed above, that all fees required by the Iowa Limited Liability Company Act have been paid, and that articles of dissolution have not been filed.



CHESTER J. CULVER SECRETARY OF STATE



Printed on
Recycled Paper