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SECRETARY OF STATE
ALACSEF FLORIDA

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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: SKYCAR USA LLC	
(Name of Limit	ed Liability Company)
	ility Company for Authorization to Transact Business in mitted to register the above referenced foreign limited
Please return all correspondence concerning this ma	tter to the following:
VALTER PROIETTI	
(Nam	ne of Person)
SKYCAR USA LLC	
(Firm	n/Company)
5600 NW 36th Strt (Suite 5	13) Miami International Airport
	Address)
PO.BOX 996548 MIAMI FL	33160
(City/Stat	e and Zip Code)
For further information concerning this matter, please	se call:
VALTER PROIETTI	at (305) 870 0745
(Name of Person)	(Area Code & Daytime Telephone Number)
MAILING ADDRESS:	STREET ADDRESS:
•	Division of Corporations
	Clifton Building
,	2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount: [2] \$125.00 Filing Fee \$\square\$ \$\$ \$\$ Certificate of \$\$	□\$155.00 Filing Fee & □\$160.00 Filing Fee, Certificate tatus Certified Copy of Status & Certified Copy

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1.	SKYCAR USA LLC (Name of Foreign Limited Liability Company)
	(Name of Foreign Limited Liability Company)
	USA DELAWARE 3. 84-1726223. (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
4.	(Date of Organization) 5. PERPETUAL (Duration: Year limited liability company will cease to exist or "perpetual")
6.	N/A
	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7.	
	5600 NW 36th Strt (Suite 513) Miami International Airport MIGMI, FI 33166 (Street Address of Principal Office)
8.	If limited liability company is a manager-managed company, check here
9.	The name and usual business addresses of the managing members or managers are as follows:
	PHILIP ANDRONICOS Historian Philip Andronicos Historian Philip Andronicos Philip Philip Andronicos Philip
	5600 NW 36th Strt (Suite 513) Miami International Airport
	Miami, F1. 33166
the	. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records i jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a aslation of the certificate under oath of the translator must be submitted.)
11	. Nature of business or purposes to be conducted or promoted in Florida: AIRLINE MANUFACTURING
	ASSEMBLY AND SALES
	Ly 64th
	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 perjury that the facts stated herein are true.)
	PHILIP AMORONICOS
	Typed or printed name 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:			
SKYCAR USA LLC			

Philip Andronicos	Z S	0	
5600 NW 36th Strt (Suite 513) Miami International Airpo	rt S	AP.	
(Name)	HASS	R 16	FILI
MIAMI FL 33166	E S	PH	
Florida Street Address (P.O. Box NOT ACCEPTABLE) FI	SIAIE FLORIDA	ų: 09	
City/State/Zin	_		

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, Florida Statutes.

(Signature)

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

Delaware

PAGE

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SKYCAR USA 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 THIRD DAY OF APRIL, A.D. 2007.

4136353 8300 070287738



Warriet Smith Mindson, Secretary of State

AUTHENTICATION: 5562344

DATE: 04-03-07