M07000004964

(Req	uestor's Name)		
(Add	lress)		
(Add	iress)		
(Add	11033)		
(City/State/Zip/Phone #)			
PICK-UP	MAIT	MAIL	
(Bus	iness Entity Nar	ne)	
(Document Number)			
Certified Copies	Certificates	of Status	
	·		
Special Instructions to F	iling Officer:		
		}	
		l	

Office Use Only



800107350848

08/13/07--01022--019 **125.00

TILED

2001 AUG 13 P U: 07

SECRETARY OF STATE
ALLAHASSEF FI CORE.

AL

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: Emerald Coast Aviation, LLC (Name of Limited Liability Company)				
The enclosed "Application by Foreign Limited Lia Florida," Certificate of Existence, and check are su liability company to transact business in Florida				
Please return all correspondence concerning this m	atter to the following:			
Charles R. Hare, Jr				
(Na	me of Person)			
Gullahorn & Hare, P.C.				
(Fir	m/Company)			
P.O. Box 1669	(Address)	2001 AUG 13 SECRETARY (TALLAHASSEE	TILED	
Albertville, Alabam	a 35050	E C		
	ate and Zip Code)	75 0	10	
For further information concerning this matter, ple	•	4: 07	O	
Charles R. Hare, Jr.	at (256) 878-1891			
(Name of Person)	(Area Code & Daytime Tele	ephone Number)		
MAILING ADDRESS: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			
Enclosed is a check for the following amount: \$\sim \frac{1}{2}\$125.00 Filing Fee \$\sim \text{Certificate of}\$		0.00 Filing Fee, Cert of Status & Cer		

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. Emerald Coast Aviation, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the wriconsent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.")
2. Alabama (Jurisdiction under the law of which foreign limited liability company is organized) 3. 26-0466901 (FEI number, if applicable)
4. July 24, 2007 (Date of Organization) 5. perpetual (Duration: Year limited liability company will cease to exist or "perpetual")
6. Upon qualification
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 2311 Industrial Drive, Panama City, Florida 32405
(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:
Kyle C. Wilson, 2311 Industrial Drive, Panama City, Florida 32405
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of record the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under eath of the translator must be submitted.)
11. Nature of business or purposes to be conducted or promoted in Florida: own and operate aircra
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.) Kyle C. Wilson

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:	
Emerald	Coast Aviation, LLC	
If name unavails	able, the alternate name to be used in the state of Florida is	:
2. The name an	d the Florida street address of the registered agent and offi	ce are:
	Kyle C. Wilson	FÄ 🗟
	(Name) 2311 Industrial Drive	T AUG 13 F
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	P 4: 0: F STATE
	Panama City, FL 32405	7 AGI
	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, 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)

Beth Chapman Secretary of State P.O. Box 5616 Montgomery, AL 36103-5616

STATE OF ALABAMA

I, Beth Chapman, Secretary of State of the State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the domestic corporate records on file in this office disclose that Emerald Coast Aviation, LLC organized in the office of the Judge of Probate of Marshall County on July 24, 2007. I further certify that the records do not disclose that said Emerald Coast Aviation, LLC has been dissolved.



In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the City of Montgomery, on this day.

August 8, 2007

Date

Beth Chapman

Beth Chapman

Secretary of State