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COVER LETTER

Registration Section
Division of Corporations

TO:

SUBJECT: _	HELIWEST L	LC.					
(Name of Limited Liability Company)							
Florida," Certif	Application by Foreign ficate of Existence, and ny to transact business	check are su					
Please return a	ll correspondence conce	erning this m	atter to the fo	ollowing:			
_	Jack	ie Wilhe	lm				
		(Na	me of Person	1)			
Delaware Business Incorporators, Inc.							
		(Fir	m/Company))			
3422 Old Capitol Trail Suite 700							
		I	(Address)			SECI	07/
-	Wilmington,		808 Ite and Zip C	'ode)		HASSEL	
For further info	ormation concerning thi	` •	-	.oue)		PH12: ns	i in
	Jackie Wilhelm	1	_ at (302	₎ 996-	5819		
	(Name of Perso	n)	(Area C	ode & Dayti	me Teleph	one Number))
Division P.O. Bo	NG ADDRESS: n of Corporations ox 6327 ssee, FL 32314		Division of Clifton Bui	ıtive Center			
	heck for the following a 00 Filing Fee \$130.00	amount: Filing Fee & Certificate of	\$155.00 I Status	Filing Fee & Certified Copy		Filing Fee, Cert of Status & Cer	

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: Heliwest LLC (Name of Poreign 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 written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.") Delaware (Jurisdiction under the law of which foreign limited liability company is organized) October 15, 2007 Perpetual (Duration; Year limited liability company will cease to exist or "perpetual") (Date of Organization) (Date first transacted business in Florida, if prior to registration.) See sections 608.501 & 608.502 F.S. to determine penalty liability) (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: 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a forcion language, a translation of the certificate under eath of the translator must be submitted.)

> 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.)

.oss KATEIN

11. Nature of business or purposes to be conducted or promoted in Florida:

Typed or printed name of signee

X

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:	
HELIWEST LLC	
If name unavailable, the alternate name to be used in the state of Florid	a is:
2. The name and the Florida street address of the registered agent and	office are:
Katrin Seuss	
(Name)	
801 Brickell Ave. Ste. 900 Florida Street Address (P.O. Box NOT ACCEPTABLE)	
Miami, pt. Ctty/State/Zip	29 29 E
Having been named as registered agent and to accept service of process filability company at the place designated in this certificate, I hereby accept agent and agree to act in this capacity. I further agree to comply with the relating to the proper and complete performance of my duties, and I am for obligations of my position as registered agent as provided for in Chapter (Signature)	nt the appointment as registered provisions of all statutes miliar with and accept the

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

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "HELIWEST 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 TWENTY-FIRST DAY OF NOVEMBER, A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "HELIWEST LLC" WAS FORMED ON THE FIFTEENTH DAY OF OCTOBER, A.D. 2007.

07 NOV 29 PH I2: 05
SECRETARY STATE



Darret Smile Hindson

AUTHENTICATION: Windsor Secretary of State

DATE: 11-21-07