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SECRETARY OF STATE
ATTAMASSEE, FLORIDA

1011-8475

COVER LETTER

TO:

Registration Section Division of Corporations

	114111	ne of Limited Liability Company	
The enclosed "A Existence, and o	Application by Foreign Limited Liabi check are submitted to register the about	ility Company for Authorization to Transact Business in Florida ove referenced foreign limited liability company to transact bus	a," Certificate of siness in Florida
Please return all	I correspondence concerning this mat	tter to the following:	
	Marie Grondin		
		Name of Person	•
	GA Telesis, LLC		
		Firm/Company	
	1850 NW 49th Street		
		Address	
	Fort Lauderdale, FL 33309	9	
		City/State and Zip Code	
	legal@gatelesis.com		_
For further infer	E-mail address: (to mation concerning this matter, please	be used for future annual report notification)	
roi furmer mior	matter, prease		
<u>M</u> arie	Pame of Person	at (954) 676-3111 Area Code & Daytime Telephone Number	. .
	ING ADDRESS: n of Corporations	STREET ADDRESS: Division of Corporations	,
		Registration Section	
	ox 6327	Clifton Building	
Tallaha		2661 Executive Center Circle	
•		Tallahassee, FL 32301	
Enclosed is a	check for the following amoun		
\$125.00	Filing Fee S130.00 Filing Fee Certificate of Statu	& \$\int_{\text{s}}\$155.00 Filing Fee & \$\int_{\text{s}}\$160.00 Filing Fee, Certified Copy of Status & Certified Copy	

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 GA Telesis Composite Repair Group, LLC	SIAILOI I DAUDA.
(Name of Foreign Limited Liability Company; must include	de "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpos consent of the managers or managing members adopting the alter Company," "L.L.C," "LLC.")	e of transacting business in Florida and attach a copy of the written nate name. The alternate name must include "Limited Liability
2. Delaware 3	26-1557876
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
4. December 12, 2007 5	Perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6. January 27, 2011	
(Date first transacted business in Flo (See sections 608.501 & 608.502 F.S.	rida, if prior to registration.) to determine penalty liability)
7. 3420 NW 53rd Street	Dec
Fort Lauderdale, FL 33309	ECA FI
(Street Address of	of Principal Office)
8. If limited liability company is a manager-managed	
9. The name and usual business addresses of the mana	iging members or managers are as follows:
Abdol Moabery	ATE RIDA
1850 NW 49th Street	
Fort Lauderdale, FL 33309	
10. Attached is an original certificate of existence, no more than 90 d the jurisdiction under the law of which it is organized. (A photocopy translation of the certificate under oath of the translator must be subm	
11. Nature of business or purposes to be conducted or	promoted in Florida:
any and all legal purposes	
	horized representative of a member.
penalties of perjury that the facts stated herein are tru	ation of this document constitutes an affirmation under the
document to the Department of State constitutes Jack Portlock	a third degree felony as provided for in s.817.155, F.S.)

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 Limit	ed Liability Company is:						
GA Telesis Comp	posite Repair Group, LLC						
If unavailable, the alternate to be used in the state of Florida is:							
2. The name and the Flor	da street address of the registered agent and office are:						
United C	orporate Services, Inc.						
	(Name)						
9200 Sc	outh Dadeland Blvd., Suite 508						
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	٠					
Miami,	FL 33156						
	City/State/Zip						
liability company at the pla agent and agree to act in th relating to the proper and c obligations of my position a	stered agent and to accept service of process for the above stated limited ce designated in this certificate, I hereby accept the appointment as registered is capacity. I further agree to comply with the provisions of all statutes omplete performance of my duties, and I am familiar with and accept the stregistered agent as provided for in Chapter 608, Florida Statutes. Signature) (Signature) (Signature)						
10-	\$ 100.00 Filing Fee for Application						
	\$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (optional)						
	\$ 5.00 Certificate of Status (optional)						

2 1 /2 4

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "GA TELESIS COMPOSITE REPAIR GROUP,

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 FOURTEENTH DAY OF

FEBRUARY, A.D. 2011.

4472425 8300

110148099

You may verify this certificate online at corp.delaware.gov/authver.shtml

AUTHENTY CATION: 8557028

DATE: 02-14-11