

M12000004402

ADVOCATE CONSULTING LEGAL GROUP, PLLC (239) 213-0066

AUG 6 2012 01:17 PM P001/009

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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H120001920703ABCW

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : ADVOCATE CONSULTING LEGAL GROUP, PLLC
Account Number : I20090000001
Phone : (239) 213-0066
Fax Number : (239) 213-0698

FILED
2012 AUG -6 AM 8:00
TALLAHASSEE FLORIDA
SECRETARY OF STATE

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

Foreign Limited Liability Company
AVIATION MANAGEMENT GROUP, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04 9
Estimated Charge	\$125.00

W12-39765

Electronic Filing Menu

Corporate Filing Menu

Help J. BRYAN

AUG -7 2012

EXAMINER

(((H12000192070 3)))

ATX1

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AVIATION MANAGEMENT GROUP, LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

RACHEL HALL

Name of Person

ADVOCATE CONSULTING LEGAL GROUP, LLC

Firm/Company

3073 HORSESHOE DR S STE 210

Address

NAPLES, FL 34104

City/State and Zip Code

RACHELH@ADVOCATETAX.COM

E-mail address: (to be used for future annual report notification)

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 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

RACHEL HALL

at (239) 213-0066

Name of Person

Area Code & Daytime Telephone Number

MAILING ADDRESS:

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

STREET ADDRESS:

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

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee
 ☐ \$130.00 Filing Fee & Certificate of Status
 ☐ \$155.00 Filing Fee & Certified Copy
 ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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July 30, 2012

ADVOCATE CONSULTING LEGAL GROUP, PLLC

SUBJECT: AVIATION MANAGEMENT GROUP, LLC
REF: W12000039765FILED
2012 AUG -6 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a foreign limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations. Therefore, the limited liability company must select an alternate name for use in the state of Florida. Also, please note that adding "of Florida" or "Florida" to the end of the name is not acceptable.

Please insert the alternate name in the space provided on the application form. You must also attach a copy of the written consent of the managers or managing members adopting the alternate name for Florida. For your convenience, we are enclosing a fill-in-the-blank form for you to complete and return to our office for processing.

The alternate name must end with the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The word "Limited" may be abbreviated as "Ltd." and the word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC".

The document number of the name conflict is #P04000163999, AVIATION MANAGEMENT GROUP, INC.

Please return your document, along with a copy of this letter, within 60

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850-617-6381

ADVOCATE CONSULTING Fax:239+213+0698
7/30/2012 8:13:50 AM PAGE 2/002

Aug 6 2012 01:19pm P007/009
Fax Server

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days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please
call (850) 245-6051.

Joey Bryan
Regulatory Specialist II

FAX Aud. #: H12000192070
Letter Number: 712A00019819

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TALLAHASSEE, FLORIDA

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2012 AUG -6 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

August 3, 2012

FLORIDA DEPARTMENT OF STATE
Division of Corporations

ADVOCATE CONSULTING LEGAL GROUP, PLLC

SUBJECT: AVIATION MANAGEMENT GROUP, LLC
REF: W12000039765

You failed to make the correction(s) requested in our previous letter.

You must submit a copy of the written consent of the managers or managing members adopting the alternate name for Florida. For your convenience, we are enclosing a fill-in-the-blank form for you to complete and return to our office for processing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Joey Bryan
Regulatory Specialist II

FAX Aud. #: H12000192070
Letter Number: 112A00020233

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Received: ADVOCATE CONSULTING Fax: 239+213+0698

Aug 3 2012 08:16am P001/001

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**WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE
STATE OF FLORIDA**

We, the undersigned, do hereby certify that we are the Managers and/or Managing

Members of AVIATION MANAGEMENT GROUP, LLC

(Name of Limited Liability Company)

a limited liability company duly organized and existing under the laws of

DELAWARE

(State or Country of Organization)

Because the name of this foreign limited liability company does not satisfy the

requirements of the s. 608.406, F.S., the limited liability company hereby adopts the

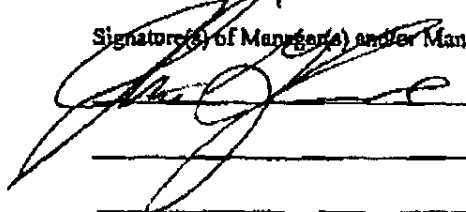
following name to transact business in the state of Florida:

AVIATION MANAGEMENT ENTERPRISE, LLC

(Name to be used by limited liability company in Florida. NOTE: Name must end with Limited Liability Company, L.L.C., or LLC.)

Date: July 26 - 2012

Signature(s) of Manager(s) and/or Managing Member(s):



_____Member

_____**FILED**
2012 AUG -6 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ATX1

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER
A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:

1. AVIATION MANAGEMENT GROUP, LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

AVIATION MANAGEMENT ENTERPRISE, 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.")

2. DELAWARE(Jurisdiction under the law of which foreign limited liability
company is organized)**3.****80-0837828**

(FEI number, if applicable)

4.**7/26/2012**

(Date of Organization)


5.**PERPETUAL**(Duration: Year limited liability company will cease to
exist or "perpetual")**6.****7/27/2012**(Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability)**7. 1993 8TH ST S****NAPLES, FL 34102**

(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:****GAGLIANO ENTERPRISES, LLC****1993 8TH ST S****NAPLES, FL 34102**

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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 foreign language, a translation of the certificate under oath of the translator must be submitted.)**

11. Nature of business or purposes to be conducted or promoted in Florida: EQUIPMENT LEASING
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. I am aware that any false information submitted in a
document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

JOHN GAGLIANO

Typed or printed name of signee

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80-0837828

ATX1

**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:

AVIATION MANAGEMENT GROUP, LLC

If unavailable, the alternate to be used in the state of Florida is:

AVIATION MANAGEMENT ENTERPRISE, LLC

2. The name and the Florida street address of the registered agent and office are:

JOHN GAGLIANO

(Name)

1983 8TH ST S

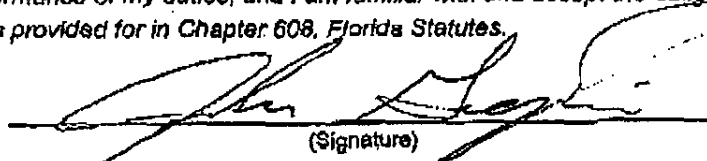
Florida Street Address (P.O. Box NOT ACCEPTABLE)

NAPLES

FL 34102

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)

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2012 AUG -6 AM 8:00
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

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Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "AVIATION MANAGEMENT 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 TWENTY-SIXTH DAY OF JULY, A.D. 2012.

FILED
2012 AUG -6 AM 8:00
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

5189766 8300

120875334

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



Jeffrey W. Bullock
Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 9736985

DATE: 07-26-12

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