M13000003194

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phone	; #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nan	ne)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only



700245277837

05/20/13--01012--009 **160.00

2019 HAY 20 PM 4: 41

NAY 21 2013 D. BRUCE

COVER LETTER

TO:	Registration Section	
	Division of Corporation	

Tunica Helicopters, 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:

- I construction control contr		
Susan Wisniewski		
Name of Person		
Tunica Helicopters, LLC		
Firm/Company		
4700 Sunnyside Road		
Address		
Philadelphia, TN 37846		
City/State and Zip Code	2013	
sue@tunicahelicopters.com	HAY 2	
E-mail address: (to be used for future annual report notification)	'20	1
For further information concerning this matter, please call:	PH	6
Sue Wisniewski "865 755-9255 🚉	4:4	ARM. 4
Name of Person Area Code & Daytime Telephone Number	<u> </u>	
MAILING ADDRESS: STREET ADDRESS: Division of Corporations Division of Corporations		

Registration Section P.O. Box 6327 Tallahassee, FL 32314 Registration Section Clifton Building 2661 Executive Center Circle Taliahassee, 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

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:

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1. Túnica Helicopters, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
Wolverine Helicopters, 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 Mississippi 3 45-4583951
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
_{4.} 02/22/2012 _{5.} perpetual
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
_{5.} 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.} 1775 Casino Center Drive
Robinsonville, MS 38664
(Street Address of Principal Office)
3. 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:
Susan Wisniewski, 4700 Sunnyside Rd, Philadelphia, TN 37846
Pablo Hernandez, 11543 Wakeworth St, Orlando, FL 32836
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 ranslation of the certificate under oath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: Helicopter Tours
PIC D.c
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

Typed or printed name of signee

Susan J. Wisniewski, D.C.

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.)

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:

Tunica Helicopters, LLC

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

Wolverine Helicopters, LLC

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

Pablo Hernand	dez	
	(Name)	
11543 Wakeworth St.		2019
Florida Street Address (P.O. Box NOT ACCEPTABLE)		
Orlando	_{FL} 32836	20 PH
City/State/Zip		
		Ģ∃ <u>₹</u>

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)

State of Mississippi

Office of the Secretary of State C. Delbert Hosemann, Jr., Secretary of State Jackson, Mississippi

CERTIFICATE

I, C. DELBERT HOSEMANN, JR., Secretary of State of the State of Mississippi, and as such the legal custodian of the records as required by The Mississippi Limited Liability Company Act to be filed in my office do hereby certify that:

TUNICA HELICOPTERS LLC

Formed February 22, 2012

A Mississippi Limited Liability Company has filed the necessary documents in this office and has obtained a certificate of formation under the provisions of The Mississippi Limited Liability Company Act as shown by the records in this office.

That the registered office of said Limited Liability Company is located at:

2218 18TH STREET GULFPORT MS 39501

and that the registered agent at that address is:

UNITED STATES CORPORATION AGENTS, INC.

I further certify that said Limited Liability Company has paid the fees for filing the above papers required by law as shown by the records of this office and that said Limited Liability Company is in good standing to do business in Mississippi at this time.

STATE OF MISSES

Given under my hand and seal of office May 13, 2013

C. Delbert Hosemann, Jr. Secretary of State

Certification Number: 13010812-1 Page 1 of 1 Reference: Verify this certificate online at https://business.sos.state.ms.us/corp/soskb/verify.asp