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FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

10/24/2013

NAME:

AVIATION LEASING ASSOCIATES LLC

TYPE OF FILING: APPLICATION

COST:

155.00

RETURN:

CERTIFIED COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 25, 2013

FLORIDA FILING & SEARCH SERVICES INC.

SUBJECT: AVIATION LEASING ASSOCIATES LLC

Ref. Number: W13000059419

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We have received your document for AVIATION LEASING ASSOCIATES LLC. However, the document has not been filed and is being returned for the following:

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

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.

Jeraline Saulsberry Regulatory Specialist II

Letter Number: 913A00024931;:

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www.sunbiz.org

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 BY INDESS IN THE STATE OF FLORIDA:

Aviation Leasing Associates, 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 consent of the managers or managing members adopted Company," "L.L.C," "LLC.")	or the purpose of transacting business in Florida and ting the alternate name. The alternate name must in	d attach a copy of the clude "Limited Liabi	- written lity
2. Delaware	3	·	_
(Jurisdiction under the law of which foreign limite company is organized)	d liability (FBI number, if applie		
4. October 3, 2013	5. Perpetual	7012	
(Date of Organization)	(Duration: Year limited liability or exist or "perpetual")	ompany will cease to	
6		22	_ ',,
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)			•
7. 500 North Dixie Highway Suite 302		· · · · · · · · · · · · · · · · · · ·	_
Coral Gables, Florida 33146		\$ 53	_
(Stre	eet Address of Principal Office)		_
8. If limited liability company is a manager9. The name and usual business addresses of		as follows:	
Scott A. Weisman, 405 Lexington Avenue, 7th F	loor, New York, NY 10174		_
Jerry D. Willoughby, 405 Lexington Avenue, 7th	Floor, New York, NY 10174		_
10. Attached is an original certificate of existence, no m the jurisdiction under the law of which it is organized. (translation of the certificate under oath of the translator	(A photocopy is not acceptable. If the certificate is in a	al having custody of re a foreign language, a	– xords in
11. Nature of business or purposes to be co	nducted or promoted in Florida: Own and Le	ease Aircraft	_
- Leath			
(In accordance with section 608.408(3), penalties of perjury that the facts stated document to the Department of States	er or an authorized representative of a mem F.S., the execution of this document constitutes an affirm therein are true. I am aware that any false information te constitutes a third degree felony as provided for	mation under the on submitted in a	
Scott A. Weisman			

Typed or printed name of signee

American LegalNet, Inc.
www.FormsWorkFlow.com

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 Leasin	g Associates, LLC		
If unavailable, t	he alternate to be used in the state of Florida is:		
2. The name an	d the Florida street address of the registered agent and office are:		2013 OCT
	C T Corporation System		24
	(Name)		3
	1200 South Pine Island Road	ر سند لمهر	ب
	Plorida Street Address (P.O. Box NOT ACCEPTABLE)	55	93 95
	Plantation, FL 33324	_	
	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.

Jeffrey Kagan Assistant Secretary

(Signature)

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



Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "AVIATION LEASING ASSOCIATES, 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 OCTOBER, A.D.

2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE
NOT BEEN ASSESSED TO DATE:

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "AVIATION LEASING ASSOCIATES, LLC" WAS FORMED ON THE THIRD DAY OF OCTOBER, A.D. 2013.

2013 OCT 24 AM 9: 53

5409680 8300

131193174

ou may verify this certificate online t corp.delaware.gov/authver.shtml Victoria N. Bullech, Secretaria of State

AUTHENTY CATION: 0812116

DATE: 10-14-13