# M1500000236

(Re	equestor's Name)			
(Ad	ldress)			
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### FLORIDA FILING & SEARCH SERVICES, INC.

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DATE: 1/9/15

NAME: AERSALE 25313 LLC

TYPE OF FILING: APPLICATION

COST: 155.00

RETURN: CERTIFIED COPY PLEASE

ACCOUNT: FCA00000015

**AUTHORIZATION: ABBIE/PAUL HODGE** 

#### **COVER LETTER**

TO:		tion Section of Corporations				
SUBJ	ect:		AERSALE 25313 LL	<u>c</u>		
		Nam	e of Limited Liability Company			
				n to Transact Business in Florida," Certificate of liability company to transact business in Florida		
Please	return all ca	orrespondence concerning this ma	itter to the following:			
		Micah Caudle				
			Name of Person			
		Capitol Services - Corporate Filings Team				
	Firm/Company					
		000 D 01- 100				
	_	800 Brazos Ste 400 Address		00		
	_	Austin TX 78701				
			City/State and Zip Code			
	_	Douglas.Meyer@	aersale.com & Carolin (to be used for future annual repor	na.Peralta@aersale.com		
			•	a donneation)		
For tur	ther inform	ition concerning this matter, pleas	se call:			
		Micah Caudle	at ( 800 )	345-4647		
		Name of Contact Person	Area Code	Daytime Telephone Number		
-		G ADDRESS:	STREET ADDRESS:			
Division of Corporations Registration Section			Division of Corporations Registration Section			
	P.O. Box	6327	Clifton Building			
	Tallahass	ee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301			
Enclo	sed is a cl	eck for the following amou	nt:	The Control of the Co		
	31 2 3.U	0 Filing Fee \$130.00 Filing Certificate of		Fee &\$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 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

AERSALE 25313 LLC     (Name of Foreign Limited Liability Company; must include "Limited Liability Company)	uted Liability Company," 'L.L.C.," or "LLC.")	
(If name unavailable, enter alternate name adopted for the purpose of transacting Liability Company," "L.L.C," or "L.L.C.")	g business in Florida. The alternate name must include "Limit	ted
2. DELAWARE 3	T.	
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)	5 <b>5</b> 5
4	프트 <u>누</u> 그	
(Date first transacted business in Florida, (See sections 605,0904 & 605,0905, F.S. to c	if prior to registration.) determine penalty liability)	9
5	if prior to registration.)  determine penalty liability)	E m
121 Alhambra Plaza Suite 1700, Coral Gables, F	lorida 33134	Į O
6.	ipal Office)	9
121 Alhambra Plz, Ste 1700	who has/have authority to manage is/are:	Nhambra Plz, Ste 170 Gables, FL 33134
	glas Meyer - CAO Coral Gables, FL 33134	
3. Scott Stewart - CFO Coral Gables, FL 33134 6. Free	121 Alhamb derick Craig Wright - Senior VP Coral Gable	bra Piz, Ste 1700 es, FL 33134
8. Attached is an original certificate of existence, no more the having custody of records in the jurisdiction under the law of acceptable. If the certificate is in a foreign language, a translamust be submitted)  Signature of an authority of the execution of this document constitutes are an aware that any false information submitted in a document to the Department of State of the state of th	f which it is organized. (A photocopy is not ation of the certificate under oath of the transla fized person	aior
Typed or printed name	of signee	

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), 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:	
AERSALE 25313 LLC	
If unavailable, the alternate to be used in the state of Florida is:	
The name and the Florida street address of the registered agent and office are:	15 . SEC
Capitol Corporate Services, Inc. (Name)	JAN -9 PRETARY AHASSEE
155 Office Plaza Dr. Ste A Plorida Street Address (P.O. Box NOT ACCEPTABLE)	PH 4: 1.9
Tallahassee FL 32301 City/State/Zip	⊅ · <del>•</del>

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 605, Florida Statutes.

Coaple Windle, Asst. Secretary on behalf of Capitol Corporate Services, Inc.

\$ 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 :

### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "AERSALE 25313 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 EIGHTH DAY OF JANUARY, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "AERSALE 25313"
LLC" WAS FORMED ON THE SIXTEENTH DAY OF SEPTEMBER, A.D. 2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES TAYE
BEEN PAID TO DATE.

15 JAN -9 PM 4:49
ECRETARY OF STATE
LLAHASSEE, FI ORIDA

5039299 8300

150028139

AUTHENTYCATION: 2022586

DATE: 01-08-15

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