Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

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**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 ONIX CAPITAL AVIATION LLC

Certificate of Status	1
Certified Copy	1
Page Count	05
Estimated Charge	\$160.00

OCT 28 2015

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COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT: Onix Capital Aviation 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:

Sofia Yague	
Name of Person	
Private Advising Group, P.A.	
Firm/Company	
600 Brickell Ave, Suite 1725	
Address	
Miami FL 33131	
City/State and Zip Code	
sofia@private-advising.com	
E-mail address: (to be used for future armual report notification)	

For further information concerning this matter, please call:

Sofia Yague

...786

292-1599

Name of Contact Person

Aron Code

Davtime Telephone Number

MAILING ADDRESS:

Division of Corporations Registration Section P.O. Box 6327 Tallahassec, FL 32314 STREET ADDRESS:

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

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee ☐ \$130.0

☐ \$130.00 Filing Fee & Certificate of Status

S155.00 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 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1 Onix Capital Aviation 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 the purpose of transacting business in Florida. The alternate name mu Liability Company," "L.L.C," or "LLC.")	st include *	"Limited
_{2.} Delaware		
(Jurisdiction under the law of which foreign limited liability (FBI number, if applicable) company is organized)		
4. (Date first transacted business in Florida, if prior to registration.)		
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)		
_{5.} 1680 Michigan Ave. Ste. 913		,
Miami Beach, FL 33139	^**** (_
(Street Address of Principal Office)	7.	15
_{6,} 1680 Michigan Ave. Ste 913		
Miami Beach, FL 33139		CT
(Mailing Address)	<u>ش</u> ير س	
7. The name, title or capacity and address of the person(s) who has/have authority to manage	is/arç:	P
Alberto Chang Rajii - Authorized Person - 1680 Michigan Ave. Ste 913, Miami Beach,	FE 331	
	22	50
Attached is an original certificate of existence, no more than 90 days old, duly authenticated asying custody of records in the jurisdiction under the law of which it is organized. (A photocacceptable, if the certificate is in a foreign language, a translation of the certificate under oath must be submitted) Signature of en authorized person In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the ponalties of perjury that the maware that may false information submitted in a document to the Department of State contracts a third dayree fellow as provided for in	opy is no of the tri	ot anslator berein ere true.
Alberto Chang Rajii		
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.

If unavailable,	the alternate to be used in	n the state of Florida is:	
	and attendance to be used in	a me state of Fioritia in.	
2. The name ar	nd the Florida street addr	ess of the registered agent and office are:	-
	NRAI Service	es, Inc.	15 C
		(Nume)	
	1200 South F	Pine Island Road	OCT 27 CRETARY AHASSI
	Florida Street	Address (P.O. Box NOT ACCEPTABLE)	
	Plantation	FL 33324	F-67
		City/State/Zip	98.00 98.00

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.

NRAI Services, Inc.

Mittle Charinance

Nicole Chouinard, Asst. Secretary

(Signature)

\$	100.00	Filing Fee for Application
5	25.00	Designation of Registered Agent
\$	30.00	Certified Copy (optional)
5	5.00	Certificate of Status (optional)

Delaware The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "ONIX CAPITAL AVIATION 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 OCTOBER, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ONIX CAPITAL AVIATION LLC" WAS FORMED ON THE TWENTY-SECOND DAY OF OCTOBER, A.D. 2015.

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

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SR# 20150648358

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

Jethry W. Ruffict I, Secretary of State

Authentication: 10302133

Date: 10-26-15