

To: 850-617-6383

From: Advocate Consulting Legal Group, PLLC

01/15/16 4:22 pm

Division of Corporations

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**Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet**

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To:

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

From:

Account Name : ADVOCATE CONSULTING LEGAL GROUP, PLLC
Account Number : J20090000001
Phone : (239) 213-0066
Fax Number : (239) 213-0698

****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
Alacrity Aviation, LLC**

Certificate of Status	1
Certified Copy	0
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Corporate Filing Menu

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COVER LETTER

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**TO: Registration Section
Division of Corporations****SUBJECT: Alacrity 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:

Brigette Harms

Name of Person

Advocate Consulting Legal Group, PLLC

Firm/Company

1300 N West Shore Blvd, Ste 220

Address

Tampa, FL 33607

City/State and Zip Code

bridgettch@advocatetax.com

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

For further information concerning this matter, please call:

Brigette Harms

239

213-0066

at

Name of Contact 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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**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS
IN FLORIDA**

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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. Alacrity 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 must include "Limited Liability Company," "L.L.C.," or "LLC.")
2. Delaware 3. 36-4799136
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
4. _____
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. 117 Salem Church Rd
Newark, DE 19713
(Street Address of Principal Office)
6. PO Box 9017
Naples, FL 34101
(Mailing Address)
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
Name: Walter D. Hardy III
Office Address: 274 Little Harbour Dr
Naples, Florida 34102
(City) (Zip code)

Registered agent's acceptance:

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 application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:Walter D. Hardy III - MGRPO Box 9017Naples, FL 34101

9. Attached is a 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. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted):


Signature of an authorized person

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

Walter D. Hardy III

Typed or printed name of signee

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Delaware

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Page 1.

**I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "ALACRITY 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 THIRTEENTH DAY OF JANUARY, A.D. 2016.**

FILED
16 JAN 15 AM 7:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



5652382 8300

SR# 20160201841

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

[Handwritten signature]

JEFFREY W. BULLOCK, Secretary of State

Authentication: 201667340

Date: 01-13-16

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