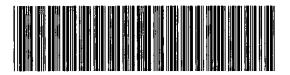
MI600000 1105

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





900281963289

02/09/16--01014--026 **160.00

20 FEB - 9 AM 11 3

LEB TO AND LES

COVER LETTER

| ТО: | Registration Sect Division of Corpo | | | |
|-----------|---------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|----------------|
| SUBJI | | NAGEMENT LLC | | |
| F2 (1141) | <u> </u> | Name of | Limited Liability Company | . . |
| | | | npany for Authorization to Transact Business in Florida, renced foreign limited liability company to transact busi | |
| Please | return all correspond | lence concerning this matter to the | e following: | |
| | MARK I | DELEVIE | | |
| | | Ŋ | Name of Person | |
| | SERVIC | E HOLDINGS LTD. CO. | | |
| | | F | Firm/Company | _ |
| | 5060 MA | DEIRA ROAD | | |
| | | | Address | |
| | VIRGIN | IA BEACH VA 23455 | | |
| | | City/9 | State and Zip Code | - |
| | MDELEV | IE@SHLIMITED.NET | | |
| | | E-mail address: (to be use | ed for future annual report notification) | - |
| For fur | ther information con | cerning this matter, please call: | | |
| | MARK DELEVIE | E | 757 460-9410 at () | |
| | N | ame of Contact Person | Area Code Daytime Telephone Number | - |
| | MAILING ADDI Division of Corpor Registration Section P.O. Box 6327 Tallahassee, FL 32 | rations on | STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 | |
| Enclose | ed is a check for the \$125.00 Filing | | ☐ \$155.00 Filing Fee & ☐ \$160.00 Filing Fee, C Certified Copy of Status & Certified Co | |

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. JET AIR MANAGEME (Name of Forei | ign Limited Liability Company; mus | t inclu | de "Limited Liab | ility Company," "L.L.C.," o | or "LLC.") |
|-------------------------------------------------------------|------------------------------------------------------------------------|------------------|-----------------------------------------------------------|----------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| If name unavailable, enter alto iability Company," "L.L.C," | ternate name adopted for the purpose | of tra | nsacting business | s in Florida. The alternate na | ame must include "Limited |
| DELAWARE | or Lie. | • | 47-4665807 | | |
| (Jurisdiction under the law o company is organized) | of which foreign limited liability | 3. | | (FEI number, if applicabl | e) |
| 4. | | | | | |
| | (Date first transacted busine (See sections 605.0904 & 605. | ss in F 0905, | lorida, if prior to F.S. to determine | registration.) penalty liability) | |
| 555 Washington Avenu | | | | , , , | ~ ~ |
| | 20 | | | | |
| Miami Beach, FL 3313 | (Street Address of F | Princin | al Office) | | — Tris (m) |
| Same as principal office | , | тистр | ai Onice) | | The state of the s |
|), | | | · | | - (A) |
| | | | | | nic. E |
| | (Mailing A | Addres | S) | | |
| 7. Name and street address | s of Florida registered agent: (P. | O. Bo | x <u>NOT</u> accepta | able) | |
| Name: | Mark Delevie | | | _ | , |
| Office Address: | 1515 N Federal Hwy., Ste 405 | | | | |
| Office Address: | Boca Raton | | | 22422 | |
| | (City) | | | , Florida (Zip code) | |
| Registered agent's accept | · · · · · · · · · · · · · · · · · · · | | | (Exp code) | |
| Having been named as reg | gistered agent and to accept serv tion, I hereby accept the appoint | rice of tment | process for the | e above stated limited lia gent and agree to act in t | bility company at the pla this canacity. I further a |
| to complywith the provision | ons of all statutes relative to the | prope | r and complete | performance of my duti | es, and I am familiar wit |
| accept the obligations of m | ny position as registered agent. | | | | |
| | / and | =7 | | 7 | _ |
| | (Registe | ered ap | ent's signature) | | |
| 8. The name, title or capac | city and address of the person(s) | who i | as/have author | ity to manage is/are: | |
| Barry Siadat, President of t | the Sole Member, 555 Washingt | on Av | enue, Ste 420, | Miami Beach FL 33139 | |
| Mark Delevie, Asst. Secret | etary of the Sole Member, 1515 N | I. Fed | eral Hwy., Ste | 105, Boca Raton FL 3343 | 32 |
| · | | | <u> </u> | | |
| | | | | | |
|). Attached is a certificate of | of existence, no more than 90 day | ys old | , duly authentic | ated by the official having | g custody of records in th |
| | of which it is organized. (If the co | ertific | te is in a foreig | n/language, a translation | of the certificate under or |
| of the translator must be sul | iomitted) | /_ | A // | , | |
| | / Jars | 1 | | | _ |
| | / Signature | of an a | utnorized persor | ı | |
| This document is executed | in accordance with section 605.0 |)203 (| l) (b), Florida S | statutes. I am aware that a | ny false information |
| This document is executed submitted in a document to | |)203 (| uthofized persor 1) (b), Florida S hird degree felo | Statutes. I am aware that a | ny false in 17.155, F.: |

Typed or printed name of signee

Mark Delevie

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "JET AIR MANAGEMENT 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 FOURTH DAY OF FEBRUARY, A.D. 2016.

IAYS OF A STATE OF A S

Authentication: 201780662

Date: 02-04-16