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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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T WASHINGTON

JAN 3 2017

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SUB AVIATORS 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:

John J. Lewis

Name of Person

SUB AVIATORS LLC

Firm/Company

777 S. Flagler Dr., Suite 800, West Tower

Address

West Palm Beach, FL 33401

City/State and Zip Code

info@subaviators.com

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

For further information concerning this matter, please call:

John Jo Lewis

888

685-8589

Name of Contact Person

at (_____) _____
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

**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. SUB AVIATORS 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, USA 3. 81-3718286
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. N/A
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 777 S. Flagler Dr., Suite 800, West Tower
West Palm Beach, FL 33401
(Street Address of Principal Office)

6. 777 S. Flagler Dr., Suite 800, West Tower
West Palm Beach, FL 33401
(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: InCorp Services, Inc.
Office Address: 17888 67th Court North
Loxahatchee, Florida 33470
(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.

(See signature on attached letter of consent to act as Registered Agent)

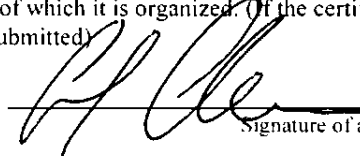
(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

John J. Lewis, Manager, SUB AVIATORS, 777 S. Flagler Dr., Suite 800, West Palm Beach, FL 33401

Gerald Clerc, Manager, SUB AVIATORS, 777 S. Flagler Dr., Suite 800, West Palm Beach, FL 33401

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.

Gerald Clerc, Manager, SUB AVIATORS, LLC

Typed or printed name of signee

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16 DEC 30 AM 10:37
STATE
OF FLORIDA



3773 Howard Hughes Parkway,
Suite 500S
Las Vegas, NV 89169

Phone 702 866 2500
Toll-Free 800 2 INCORP (1-800-246-2677)
Fax 702 866 2689

www.incorp.com

December 20, 2016

Corporations Division
Florida Department of State
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: SUB AVIATORS, LLC

To Whom It May Concern;

InCorp Services, Inc., an authorized Corporate Registered Agent in Florida, whose office is located at 17888 67th Court North, Loxahatchee, FL 33470, herein consents to act as Registered Agent for **SUB AVIATORS, LLC** for purposes and services only related to the Florida Department of State.

If you have any questions, please contact me at (800) 246-2677, Monday-Friday, 8am-5pm PST.

Sincerely,

A handwritten signature in black ink, appearing to read "Kathy Shin", written over a horizontal line.

Kathy Shin, Processor
InCorp Services, Inc.
kathy.shin@incorp.com

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TALLAHASSEE, FLORIDA

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "SUB AVIATORS, 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 TWENTIETH DAY OF DECEMBER, A.D. 2016.

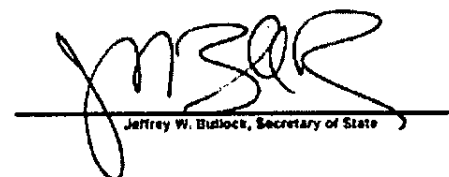
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OFFICE OF THE SECRETARY OF STATE
DOVER, DELAWARE



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


Jeffrey W. Bullock, Secretary of State

Authentication: 203553058

Date: 12-20-16