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From: Account Name : ADVOCATE CONSULTING LEGAL GROUP; PLLC  
Account Number : 120090000001  
Phone : (239) 213-0065  
Fax Number : (239) 213-0698

Email Address: [brigitteh@advocate.tx.com](mailto:brigitteh@advocate.tx.com)

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## COVER LETTER

TO: <sup>2</sup> Registration Section  
Division of Corporations

SUBJECT: Stagg 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 Hamms

Name of Person

Advocate Consulting Legal Group, PLLC

Firm/Company

1300 N Westshore Blvd, Ste 220

Address

Tampa, FL 33607

City/State and Zip Code

bridgeteh@advocatetax.com

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

For further information concerning this matter, please call:

Brigette Hamms

239

213-0066

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  
Chilton 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

IN COMPLIANCE WITH SECTION 605.0602, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. Stagg Aviation LLC

(Name of Foreign Limited Liability Company, must include "Limited Liability Company," "LLC," 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," "LLC," or "LLC".

2. Delaware

(Jurisdiction under the law of which foreign limited liability company is organized)

3. \_\_\_\_\_

(LLC number, if applicable)

4. \_\_\_\_\_

(Date first transacted business in Florida, or prior to registration.  
(See sections 605.0604 & 605.0605, F.S. to determine priority liability.)

5. 1763 Pitman Avenue

(Street Address of Principal Office)

Bronx, NY 104666. 1763 Pitman Avenue

(Mailing Address)

Bronx, NY 104667. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)Name: Pacific Registered Agents, Inc.Office Address: 5647 110th Ave. NorthRoyal Palm Beach

(City)

Florida 33411

(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.

Attached

(Registered agent's signature)

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

Title or Capacity:Name and Address:Title or Capacity:Name and Address:MemberMark Stagg1763 Pitman AvenueBronx, NY 10466Member765 MS CORP1763 Pitman AvenueBronx, NY 10466

(Use attachments if necessary)

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.)

10. 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.

Signature of an authorized person

Mark Stagg

(Typed or printed name of signer)


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### CONSENT TO SERVE AS FLORIDA REGISTERED AGENT

I, Charles F. Mathias, President of Pacific Registered Agents, Inc., consent to serve as Registered Agent in the State of Florida for **Stagg Aviation LLC**. I understand it will be our responsibility to accept service of process on behalf of the corporation, to forward mail addressed to the corporation in care of Pacific Registered Agents, Inc., and to immediately notify the Office of the Secretary of State if we resign or change the registered office or business address. Our registered office and business address is:

Pacific Registered Agents, Inc.  
5647 110th Ave. North  
Royal Palm Beach, FL 33411

  
\_\_\_\_\_  
Signature of Agent

Title: President  
Date: 1/18/2018

1/18/2018  
10:00

1/18/2018  
10:00

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# Delaware

The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF  
DELAWARE, DO HEREBY CERTIFY "STAGG 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 SIXTEENTH DAY OF JANUARY, A.D. 2018.



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SR# 20180282714

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

A handwritten signature in black ink, appearing to read "JB", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 201978524

Date: 01-16-18