M1800001999

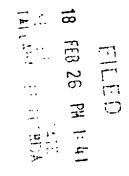
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special instructions to Fitting Officer.

Office Use Only



500308558655

02/05/18--01011--008 ++125.00



FEB 27 ZBIB





FLORIDA DEPARTMENT OF STATE Division of Corporations

February 7, 2018

L FORREST OWENS 110 SE 6TH STREET, 17TH FLOOR FT LAUDERDALE, FL 33301 US

SUBJECT: IMAGINE AIR LEASING, LLC

Ref. Number: W18000012377

We have received your document for IMAGINE AIR LEASING, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Judy A Leggett Regulatory Specialist II Registration Section

Letter Number: 618A00002624

FIG 27 ---

COVER LETTER

TO:

Registration Section **Division of Corporations**

CUDIFCT.		IMAGINE AIR LEASIN	IG, LLC						
SUBJECT:		Name of	Limited Liability	Company					
The enclosed "A Existence, and c	Application by Foretheck are submitted	eign Limited Liability Comp I to register the above refer	pany for Authoriza enced foreign limi	ition to Tra ted liability	ansact Business in Florida," y company to transact busir	Certificate of less in Florida.			
Please return all	correspondence c	oncerning this matter to the	following:						
		L. Forrest Owens							
		И	ame of Person	· <u>-</u> -					
	L. Forrest Owens, P.A.								
	Firm/Company								
	110 SE 6th Street. 17th Floor								
	Address								
	Fort Lauderdale, FL 33301								
	City/State and Zip Code								
		forrest@aviationleg:							
		E-mail address: (to be use	d for future annua	report not	tification)				
For further infor	rmation concerning	g this matter, please call:							
	L. Forrest Owens		888 at (635-9	529				
	Name o	f Contact Person	Area Code		rtime 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		of Corporations ion Section uilding centive Center Circle					
	eck for the follow 5.00 Filing Fee	ing amount: \$\Bigsize \\$130.00 \text{Filing Fee & Certificate of Status}\$	☐ \$155,00 Fili Certified Copy		☐ \$160.00 Filing Fee, C 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 RUSINESS IN THE STATE OF FLORIDA:

1	Imagine Air	Leasing, LLC					
(Name of Foreign	Limited Liability Company, must include	"Limited Liability	Company, "L.L.C.," or "L.LC.")				
	ame adopted for the purpose of transacting busine			bility Company," "L.L.C."	or "LLC.")		
Delaware (lurisdiction under the law of which foreign limited liability company is organized)			3. 200098571 (FEI number, it applicable)				
		•,		4,,,,			
4	(Date first transacted business in Florida, if	near to registration	1				
	(Date first transacted business in Florida, if (See sections 605,0904 & 605,0905, F.S. to	determine penalty	liabelity)				
5. 125 Little Falls Driv (Street Address of P		6.					
Wilmington, DE 19			(Mailing Addr Wilmington, DE 198				
	· · · · · · · · · · · · · · · · · · ·			*** 			
	·				-1./ -1./		
7 M 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	eri ii ii ii ii ii ii ii ii ii	N NAT	. 11.)	2.	ران التي التي التي التي التي التي التي التي		
/. Name and street addres	s of Florida registered agent: (P.C). Box <u>NOT</u> a	(cceptable)	. •	26		
Name:	L. Forrest Owens, P.A.				建艺		
000	110 SE 6th Street, 17th Floor				.3~		
Office Address:					£-		
	Fort Lauderdale		, Florida 33301 (Zip code		مب		
Registered agent's accep	(City)		(Zip code	e)			
una accept the obligations	s of my position as registered ages s/L. Forrest Owens	nı.					
	(Registered	agent's signature)					
8. The name, title or capa	city and address of the person(s) v	who has/have a	authority to manage is/are:				
Title or Capacity:	Name and Address:		tle or Capacity:	Name and Add	ireșs:		
Manager	Cathy Daly						
	491 NW 72nd Street						
	Boca Raton, FL 33487						
	-				<u>_</u>		
(Use attachments if necess	sary)						
	-		handana dha dha a 60 an 196	od o oka to or o			
	of existence, no more than 90 day of which it is organized. (If the cer						
of the translator must be su							
10. This decourses in access	and to accordance the continuous	£ 0202 (1) (1)	Fig. 5				
	ated in accordance with section 60 the Department of State constitute				ormation		
		$-\mathcal{X}$	(1)				
		agnature of an autho	rized person				
			•				
	L. Forre	est Owens					
		Typed or printed nar	ne of signee				



Page 1

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

DELAWARE, DO HEREBY CERTIFY "IMAGINE AIR LEASING, 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 FIFTEENTH DAY OF FEBRUARY, A.D. 2018.

Authentication: 202158744

Date: 02-15-18