

M18000002720

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

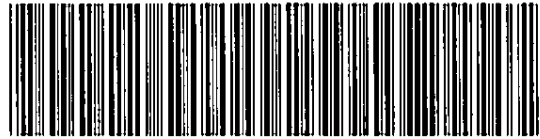
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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03/06/18--01016--011 \*\*125.00

18 MAR 20 AM 2:35

J. LEGGETT  
MAR 20 2018



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 7, 2018

EDWARD H KAMMERER  
100 WESTMINSTER ST, SUITE 1500  
PROVIDENCE, RI 02903-2319 US

SUBJECT: AVENTURE AVIATION LLC  
Ref. Number: W18000021957

We have received your document for AVENTURE AVIATION 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 business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

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: 518A00004599

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Aventure 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:

Edward H. Kammerer  
Name of Person

Hinckley, Allen & Snyder LLP  
Firm/Company

100 Westminster St., Suite 1500  
Address

Providence, RI 02903-2319  
City/State and Zip Code

ekammerer@hinckleyallen.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Edward Kammerer at ( 401 ) 274-2000  
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:

- |   |   |  |   |
|---|---|--|---|
| <input checked="" type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &<br>Certified Copy | <input type="checkbox"/> \$160.00 Filing Fee, Certificate<br>of Status & Certified Copy |
|---|---|--|---|

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS  
IN FLORIDA

IN COMPLIANCE WITH SECTION 605.042, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY  
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Aventure 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

J 82-4074689

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

(FEF number, if applicable)

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

(Date first transacted business in Florida, if prior to registration;  
see sections 605.0404 & 605.0405, F.S., to determine priority liability.)

5. 16760 Captiva Drive

(Street Address of Principal Office)

P.O. Box 718

Captiva, Florida 33924

6. 16760 Captiva Drive

(Mailing Address)

P.O. Box 718

Captiva, Florida 33924

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

Name: Joan A. Sherman

Office Address: 16760 Captiva Drive # 718

Captiva, Florida 33924  
(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.

Aventure Aviation LLC  
By: \_\_\_\_\_

(Registered agent's signature)

Joan A. Sherman

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:

Member

Donald A. Sherman

Member

Joan A. Sherman

16760 Captiva Drive, PO Box 718  
Captiva, FL 33924

16760 Captiva Drive, PO Box 718  
Captiva, FL 33924

(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.

Joan A. Sherman  
(Signature of an authorized person)

Joan A. Sherman  
(Typed or printed name of signer)

10/18/20 AM 2:35

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ADVENTURE 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 TWENTY-SEVENTH DAY OF FEBRUARY, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ADVENTURE AVIATION LLC" WAS FORMED ON THE SEVENTEENTH DAY OF JANUARY, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.



6714032 8300

SR# 20181451110

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.

Authentication: 202222301

Date: 02-27-18



28 State Street  
Boston, MA 02109-1775  
p: 617-345-9000 f: 617-345-9020  
hinckleyallen.com  
Rebecca A. Lilas  
rlilas@hinckleyallen.com

March 12, 2018

VIA CERTIFIED MAIL  
#7011 2970 0003 96880 9413

Division of Corporations  
Registration Section  
P.O. Box 6327  
Tallahassee, FL 32314

Re: Formation of Limited Liability Company – Aventure Aviation LLC

Dear Sir/Madam:

Please accept the enclosed revised filing. As requested in filing rejection document number W18000021957 we have revised the registered agent to be Joan A. Sherman.

Very Truly Yours,

Rebecca A. Lilas  
RAL:kjl

Enclosures

RECEIVED  
2018 MAR 19 AM 10:19  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FL 32314

► ALBANY ► BOSTON ► CONCORD ► HARTFORD ► NEW YORK ► PROVIDENCE

HINCKLEY, ALLEN & SNYDER LLP, ATTORNEYS AT LAW

#57506952 v2 074068/0176138