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S. PRATHER

Advanced Incorporating Service

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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:

2. Delaware	, we adopted for the number of transaction becomes in ${\sf FV}$	ands. The alternate name must include "I enited by	ability Company," "L. L. C." or "LLC.")
) Delaware	the anapted for the purpose of transacting outdiess in the	20-4231046	ating company, Lee, or Lee, y
(Jurisdiction under the law of which foreign limited liability company is organized)		3. (FEI number, il applicable)	
611			
4. upon filing	(Date first transacted business in Florida, if prior to	registration.)	
	(See sections 605.0904 & 605.0905, F.S. to determ	nane penalty liability)	4.03
5. 2645 South Bayshore, Address of Pr		6. 2645 South Bayshore, Ap	(f. 802
Miami, FL 33133	ranipar office)	Miami, FL 33133	
			<u> </u>
			
7. Name and street address	s of Fiorida registered agent: (P.O. Box	x <u>NOT</u> acceptable)	2018 NOV -
Name:	David G. Shannon		35 1
Office Address:	110 SE 6th Street, Suite 2600		S 55 E
	Ft. Lauderdale	, Florida 33301	± 00 €
	(Cuy)		
designated in this applicate to comply with the provisi	tion, I hereby accept the appointment of ions of all statutes relative to the proper s of my position as registered agent.	as registered agent and agree to ac	et in this capacity. I further agi
designated in this applicate to comply with the provisi	tion, I hereby accept the appointment of ions of all statutes relative to the prope	as registered agent and agree to ac er and complete performance of my	ed liability company at the place of in this capacity. I further ago of duties, and I am familiar with
designated in this applicate to comply with the provision and accept the obligations 8. The name, title or capa	tion, I hereby accept the appointment of the form of all statutes relative to the property of my position as registered agent. (Registered agent's acity and address of the person(s) who h	as registered agent and agree to ac er and complete performance of my s signature) nas/have authority to manage is/are:	t in this capacity. I further agi duties, and I am familiar with
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Typed or printed name of signee

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "SUMMIT AIR, 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 THIRTY-FIRST DAY OF OCTOBER, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SUMMIT AIR, LLC" WAS FORMED ON THE FIRST DAY OF FEBRUARY, A.D. 2006.

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

Authentication: 203718524

Date: 10-31-18