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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates o	of Status
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## **COVER LETTER**

Registration Section Division of Corporations

TO:

SUBJECT: Whitestone Aviation LCC Name of Limited Liability Company	_	
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida Existence, and check are submitted to register the above referenced foreign limited liability company to transact bus		
Please return all correspondence concerning this matter to the following:		
Marie Sabian Name of Person	_	
whitestone Construction Group LC	_	
Firm/Company		
640 E. SR 434, Suito 2000 Address	-	and a
Langwack, FL 32750 City/State and Zip Code	18 DEC	7 ; 22, 7
City/State and Zip Code	3D	· 5.1
mtzivaniawnitestonecq. com  E-mail address: (to be used for future unual report notification)	- <del>2</del> 2	- (2) 수(함 - (2) 수(함 - (2) 6
For further information concerning this matter, please call:	2: 1,5	ACTIVE STATE
Maric Sablan at (407) 735-7744  Name of Contact Person Area Code Daytime Telephone Number	_	1.5
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301		
Enclosed is a check for the following amount:  Output  Enclosed is		ate



November 15, 2018

MARIE SABLAN WHITESTONE CONSTRUCTION GROUP LLC 640 E SR 434, SUITE 2000 LONGWOOD, FL 32750

SUBJECT: WHITESTONE AVIATION LLC

Ref. Number: W18000099683

We have received your document for WHITESTONE AVIATION LLC and your check(s) totaling \$125.00. However, the document has not been filed and is being retained in this office for the following:

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.

The certificate that you submitted was not the proper certificate.

Please return 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) 245-6050.

Diane Cushing Senior Section Administrator

Letter Number: 118A00023533

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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: (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 "L.C.") isdiction under the law of which foreign limited liability company is organized) (FEI number, it applicable) (Date first transacted business in Florida, if prior to registration.) (See sections 605,0904 & 605,0905, F.S. to determine penalty liability) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) . Fillburn Name: Office Address: 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 agence 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: mark C. Filburn Month 3R434 Such (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 C. Filburn

Page 1



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "WHITESTONE 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 THIRTIETH DAY OF NOVEMBER, A.D. 2018.

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

Authentication: 203997843

Date: 11-30-18

7106230 8300 SR# 20187890688

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