

MISSOURI

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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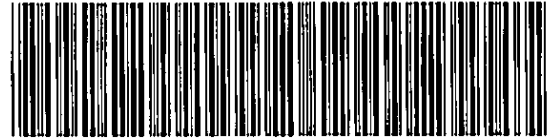
(Business Entity Name)

(Document Number)

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

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D. SCOTT  
DEC 10 2018



Blue Spruce Services, LLC  
6225 A1A S Unit A  
Saint Augustine, FL 32080  
Document Number W18000096545

Division of Corporations  
Registration Section  
PO Box 6327  
Tallahassee, FL 32314  
Attn: Dionne Scott

Ms. Scott,

The attached is a corrected of our 2 Nov 18 submission for Document Number W18000096545. I have now signed as the Registered Agent. If there is anything else I can do to assist with this filing, please let me know.

Respectfully,

Sean P. Doughty  
Blue Spruce Services, LLC  
(904) 217-3887

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COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Blue Spruce Services, 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:

Sean Doughty

Name of Person

D3 Air & Space Operations, Inc

Firm/Company

6225 A1A S Unit A

Address

Saint Augustine, FL 32080

City/State and Zip Code

sdoughty@d3aso.com

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

For further information concerning this matter, please call:

Sean Doughty

904

217-3887

at ( )

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:

\$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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DIVISION OF CORPORATIONS  
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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:*

1. Blue Spruce Services, LLC  
(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 "LLC.")

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

3. 47-5511693  
(FEI number, if applicable)

4. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration)  
 (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. Blue Spruce Services, LLC  
(Street Address of Principal Office)  
5921 Linglestown Road  
Harrisburg, PA 17112

6. Blue Spruce Services, LLC  
(Mailing Address)  
5921 Linglestown Road  
Harrisburg, PA 17112

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 HARRISBURG, PA

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

Name: Sean Doughty

Office Address: 6225 A1A S Unit A

Saint Augustine, Florida 32080  
(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.*

SPD  
(Registered agent's signature)

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

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<u>Pres</u>	<u>Paul Amalfitano</u> <u>5921 Linglestown Road</u> <u>Harrisburg, PA 17112</u>	<u>Agent</u>	<u>Sean Doughty</u> <u>6225 A1A S Unit A</u> <u>Saint Augustine, FL 32080</u>
_____	_____	_____	_____
_____	_____	_____	_____

(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.

SPD  
 \_\_\_\_\_  
Signature of an authorized person

Sean Doughty  
 \_\_\_\_\_  
Typed or printed name of signer

COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF STATE

10/17/2018

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TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

Blue Spruce Services LLC

is duly registered as a Pennsylvania Limited Liability Company under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT this Subsistence Certificate shall not imply that all fees, taxes and penalties owed to the Commonwealth of Pennsylvania are paid.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written

*Robert Lanes*

Acting Secretary of the Commonwealth

Certification Number: TSC181017151482-1

Verify this certificate online at <http://www.corporations.pa.gov/orders/verify>