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COVER LETTER

TO:

Registration Section

SUBJECT:	Flight Fit N Fun Jacksonville Beach LLC								
		Name of Limited Liability Company							
The enclosed Existence, ar	l "Application by Fond check are submitted	reign Limited Liability Comed to register the above refer	pany for Authorization to enced foreign limited liab	Transact Business in Florid bility company to transact b	da," Certificate of usiness in Florida.				
Please return	all correspondence	concerning this matter to the	following.						
	Sandra Arella:	10							
		. N	ame of Person		_				
	Flight Fit N Fi	ın		<u></u>	20				
		F	irm/Company	F-(
	21525 Ridgeto	p Circle, Suite 240		46	7019 NOV -5				
			Address	SEE	E P M				
	Sterling, VA 2	0166		, 	PH 3: 13				
		City/S	state and Zip Code		-3				
	sarellano@fligh								
		E-mail address: (to be use	d for future annual report	t notification)					
For further in	itormation concerns	ng this matter, please call:							
San	idra Arellano		703 \$79	D-5768					
	Name	of Contact Person	Area Code	Daytime Telephone Numbe	τ				
Div Reg P.O	ILING ADDRESS ision of Corporation istration Section . Box 6327 ahassee, FL 32314		Divis Regis Clifto 2661	EET ADDRESS: tion of Corporations stration Section on Building Executive Center Circle hassee, FL 32301					
	check for the follow 125,00 Filing Fee	ving amount: \$\Begin{align*} \text{S}\cdot 30.00 \text{ Filing Fee & Certificate of Status} \end{align*}	☐ \$155.00 Filing Fee Certified Copy	& ☐ \$160.00 Filing Fee of Status & Certified					

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

IN COMPLIANCE WITH SECTION 605,0002, FLORIDA STATUTES, THE POLLOWING IS SUBMITTED TO REGISTER A PUREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Delware, USA (Jurisdiction under the law of which					muuC.")
(Jurisdiction under the law of which		3.	84-3420670	•	
	foreign limited (landity company is organized)	• • •	(FEI n	number, if applieable)	
	(Date that transacted business in Florida, if pent (See sections 605 0901 & 605,0905, F.S. to deter	to registration	ilebulity\		
21525 Ridgetop Circle			21525 Ridgetop Circle		
(Street Address of Praix	ipal Office)	5.	(Mailing 2	Aldiess)	
Suite 240			Suite 240	2	
Sterling, VA 20166			Sterling, VA 20166	1111 19	
		,		2 in 6	
Name and street address of	of Florida registered agent: (P.O. Bo	ox NOT a	ecceptuble)	第五 1	
	,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	SSE C	7 !
Name:	T Corporation System			inc a	
Office Address:	200 South Pine Island Road			FL.	ي ر
	34-*		20224		.·
r 	lantation (Cny)		, Florida <u>32324</u>		w
signated in this application comply with the provision of accept the obligations of the contractions of th	tered agent and to accept service of n, I hereby accept the appointment s of all statutes relative to the proper f my position as registered agout.	as registe er and con	ored agent and agree to a suplete performance of in MARGARET F. Ri	net in this capacity. If my duties, and I am fan	urther aş
signated in this applicatio comply with the provision d accept the obligations o	n, I hereby accept the appointment s of all statutes relative to the prope	as registe er and con	red agent and agree to a uplete performance of m	net in this capacity. If my duties, and I am fan	urther ag
signated in this application comply with the provision daccept the obligations of accept the obl	n, I hereby accept the appointment s of all statutes relative to the prop f my position as registered agout.	as registe er and con	ored agent and agree to a implete performance of m MARGARET E. Re Special Assistant S	nct in this capacity. If my duties, and I am fan OUTZAHN OCTMAN	urther ag
signated in this application comply with the provision daccept the obligations of accept the obl	n, I hereby accept the appointment s of all statutes relative to the prop. f my position as registered again Marguel E. Kare (Registered again)	as registe er and con signature)	ored agent and agree to a implete performance of m MARGARET E. Re Special Assistant S	nct in this capacity. If my duties, and I am fan OUTZAHN OCTMAN	urther ag nilior wit
signated in this application comply with the provision of accept the obligations of the control of the name, title or capacity	n, I hereby accept the appointment is of all statutes relative to the proper my position as registered again. **National Formation (Registered again) y and address of the person(s) who	as registe er and con signature)	med agent and agree to a implete performance of in MARGARET E. Respectal Assistant Sentiliority to manage is/are	net in this capacity. If any duties, and I am fan OUTZAHN ocretary	urther ag nilior wit
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Typed or printed name of signee

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "FLIGHT FIT N FUN (JACKSONVILLE BEACH)

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-FOURTH DAY OF OCTOBER, A.D.

2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "FLIGHT, FIT N FUN (JACKSONVILLE BEACH) LLC" WAS FORMED ON THE FIFTEENTH DAY, OF OCTOBER, A.D. 2019.

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

Authentication: 203864850

Date: 10-24-19

7655849 8300 SR# 20197721299