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

IN COMPLIANCE WITH SECTION 605.0502, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Signature Flight Support LLC

••

• • •

(Name of Foreign Limited Liability Company, must include "Limited Liability Company," "L.L.C.," or "LLC.")

Delaware		3	59-3030932		
Jurisdiction under the law of which foreign limited liability company is organized			(Fill number, if applica	birj	
	(Date first transacted business in Florida, if prior to (See sections 605.0904 & 605.0905, F.S. to determine	ne perady	n / (tability)		
13485 Veterans Way, Suite 600		6.	13485 Veterans Way, Suite 600		
Name and street addres	s of Florida registered agent: (P.O. Box	<u>NOT</u>	acceptable)	2029	
Name.	Corporation Service Company			1 	
Office Address.	1201 Hays Street			C) 	
	Tailahassee		32301 Florida	==	
			(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.

Amanda Robinson, Asst. Vice President (Registered agent's signature)

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8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity:	Name and Address:	<u>Title or Capacit</u>	<u>v:</u>	Name and Address:
🚍 Manager	Maria L. Garton	⊡Manager	Name:	
[]]Member	Address:	⊡Member	Address:	
□Authorized	Suite 600	□Authorized	<u> </u>	
Person	Orlando, Florida 32827	Person		
[]Other	Other	⊡Other	<u> </u>	Other
Manager	Mark R Johnstone	⊡Manager	Name	
[]]Member	Address:	□ Member	Address:	
Authorized	Suite 600	Authorized		
Person	Orlando, FL 32827	Person		22
[]Other	Other	⊡Other		[]Other
🖷 Manager	Tony Lefebvre	□Manager	Name	
Member	Address	⊡ Member	Address.	
□Authorized	Suite 600	□Authorized		อ้า
Person	Ortando, FL 32827	Person		
[]Other		Other		Other

Important Notice. Use an attachment to report more than six (6) The attachment will be imaged for reporting purposes only. Nonindexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

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.

me

Signature of an authorized person

Maria L. Garton

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Delaware

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SIGNATURE FLIGHT SUPPORT 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 TWELFTH DAY OF MAY, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SIGNATURE FLIGHT SUPPORT LLC" WAS FORMED ON THE FOURTEENTH DAY OF JUNE, A.D. 1990.

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

____ ___ 91:11:1



M.d.

Authentication: 202920030 Date: 05-12-20

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SR# 20203794089 You may verify this certificate online at corp.delaware.gov/authver.shtml

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June 8, 2020

FLORIDA DEPARTMENT OF STATE Division of Corporations

CSC

SUBJECT: SIGNATURE FLIGHT SUPPORT LLC REF: W20000056622

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet. The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the

name of an existing entity on our records. Therefore, the limited $\frac{1}{12}$ liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company $\frac{1}{27}$ " the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable : "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.", also are no longer acceptable.

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) 245-6051.

Yvette Scott Document Specialist II FAX Aud. #: H20000170210 Letter Number: 820A00011195

P.O BOX 6327 - Tallahassee, Florida 32314

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June 8, 2020

FLORIDA DEPARTMENT OF STATE Division of Corporations

Division of Corporations 201 S ORANGE AVE SUITE 1100 ORLANDO, FL 32801US

Re: Document Number P31778

Having fulfilled the requirements of section 607.1520 or 617.1520, F.S., on June 5, 2020, this Certificate of Withdrawal is hereby issued to SIGNATURE FLIGHT SUPPORT CORPORATION, a Delaware corporation, in accordance with said statute. The corporation may now withdraw from the state of Florida.

This document was electronically received and filed under FAX audit number H20000170202.

Should you have any questions regarding this matter, please telephone (850) 245-6050, the Amendment Filing Section. Yasemin Y Sulker Regulatory Specialist III Division of Corporations Letter Number: 820A00011252