

N 20000006395

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W20000076215

W20000070789

Office Use Only



000347762030

FILED

2020 JUL -8 PM 4:48

DEPT. OF STATE
TALLAHASSEE, FLORIDA

RECEIVED

2020 JUL -8 PM 2:25

DEPT. OF STATE
TALLAHASSEE, FLORIDA

7/20/20
45



CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

RESUBMIT
Please give original
submission date as file date.

ACCOUNT NO. : I20000000195
REFERENCE : 342372 7784975
AUTHORIZATION : *[Signature]*
COST LIMIT : \$ 125.00

ORDER DATE : July 2, 2020
ORDER TIME : 10:11 AM
ORDER NO. : 342372-005
CUSTOMER NO: 7784975

FILED
2020 JUL -8 PM 4:48
TALLAHASSEE, FLORIDA

FOREIGN FILINGS

NAME: KATMAI-AYR, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Kadesha Roberson -- EXT# 62980

EXAMINER: _____



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 21, 2020

CSC

SUBJECT: KATMAI-AYR
Ref. Number: W20000076215

RESUBMIT
Please give original
submission date as file date.

We have received your document for KATMAI-AYR and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$638.75.

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

Letter Number: 320A00013677

**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. Katmai-AYR, 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. Alaska 3. 84-2539998
(Jurisdiction under the law of which foreign limited liability company is organized) (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. 11001 O'Malley Centre Drive
(Street Address of Principal Office)
Suite 204
Anchorage, AK 99515

6. 11001 O'Malley Centre Drive
(Mailing Address)
Suite 204
Anchorage, AK 99515

FILED
2020 JUL -8 PM 4:48
TALLAHASSEE, FLORIDA

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

Name: Corporation Service Company
Office Address: 1201 Hays Street
Tallahassee, Florida 32301
(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.

Amanda E. Robinson
(Registered agent's signature)

Amanda Robinson
Asst. Vice President

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:**

☒ Manager Name: Katmai Government Services, LLC

☒ Member Address: 11001 O'Malley Centre Drive

☐ Authorized Suite 204

Person Anchorage, AK 99515

☐ Other ☐ Other

☐ Manager Name: Richard Shane Harvey

☐ Member Address: 11001 O'Malley Centre Drive

☒ Authorized Suite 204

Person Anchorage, AK 99515

☒ Other Vice President ☒ Other KGS Member Rep.

☐ Manager Name: Edwin Coyl

☐ Member Address: 11001 O'Malley Centre Drive

☐ Authorized Suite 204

Person Anchorage, AK 99515

☒ Other Gen. Manager ☐ Other

Title or Capacity: **Name and Address:**

☐ Manager Name: AYR Aviation Limited

☒ Member Address: 100 Pall Mall

☐ Authorized

Person St James's London SW1Y 5NQ UK

☐ Other ☐ Other

☐ Manager Name: Serge Sergeef

☐ Member Address: 100 Pall Mall

☐ Authorized

Person St James's London SW1Y 5NQ UK

☒ Other AYR Member Rep. ☐ Other

☐ Manager Name:

☐ Member Address:

☐ Authorized

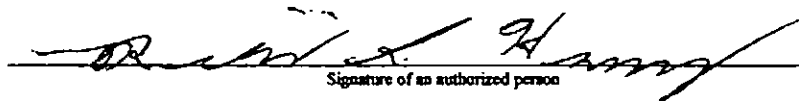
Person

☐ Other ☐ Other

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed 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.


Signature of an authorized person

Richard Shane Harvey

Typed or printed name of signer

Alaska Entity #10110395

State of Alaska
Department of Commerce, Community, and Economic Development
Corporations, Business, and Professional Licensing

Certificate of Compliance

The undersigned, as Commissioner of Commerce, Community, and Economic Development of the State of Alaska, and custodian of corporation records for said state, hereby issues a Certificate of Compliance for:

Katmai-AYR, LLC

This entity was formed on July 26, 2019 and is in good standing. This entity has filed all biennial reports and fees due at this time.

No information is available in this office on the financial condition, business activity or practices of this corporation.



IN TESTIMONY WHEREOF, I execute the certificate and affix the Great Seal of the State of Alaska effective July 2, 2020.

A handwritten signature in cursive script, appearing to read "Julie Anderson".

Julie Anderson
Commissioner

FILED
2020 JUL -8 PM 4:48
TAL KHASSET, FLORIDA