# M23000001110

Office Use Only



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C. Brumbley



May 2, 2023

CAROLINE VAN SCHELTINGA 3700 AIRPORT RD., STE. 406 BOCA RATON, FL 33431

SUBJECT: SUNDANCE JETSHARE LLC

Ref. Number: W23000063713



We have received your document for SUNDANCE JETSHARE LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

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.

KYLE D BRUMBLEY
Regulatory Specialist II Supervisor

Letter Number: 523A00009840

RECEIVED

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#### **COVER LETTER**

TO:

Registration Section

Division of Corporations							
SUBJECT:							
	Name of Limited Liability Company						
The enclosed Existence, ar	d "Application by Foreign Limited Liability Cond check are submitted to register the above re	ompany for Authorization to Transact Business in Florida," Certificate of ferenced foreign limited liability company to transact business in Florida.					
Please return	all correspondence concerning this matter to t	the following:					
	CAROLINE VAN SCHELTINGA						
	Name of Person						
SUNDANCE JETSHARE LLC							
	Firm/Company						
	3700 AIRPORT ROAD, STE 406						
Address							
	BOCA RATON, FL 33431						
	City	/State and Zip Code					
CAROLINE.VANSCHELTINGA@ECLIPSE.AERO							
	E-mail address: (to be u	sed for future annual report notification)					
For further in	nformation concerning this matter, please call:						
CA	ROLINE VAN SCHELTINGA	917 4212753 at ()					
<del></del>	Name of Contact Person	Area Code Daytime Telephone Number					
Mailing Address: Registration Section		Street Address: Registration Section					
Division of Corporations		Division of Corporations					
P.O. Box 6327		The Centre of Tallahassee					
Tal	llahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303					
Plea	closed is a check for the following amount: ase make check payable to: FLORIDA DEPA \$125.00 Filing Fee \$\text{Certificate of } \text{Certificate of } Cert	& 🔲 \$155.00 Filing Fee & 🗏 \$160.00 Filing Fee, Certificate					

### 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 COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

name umvailable, enter alternate r	same adopted for the purpose of transacting business in Flo	orida. The alternate name must include "Limited Liability Company	," "L.I. C," or	
WY  (Jurisdiction under the law of which foreign limited liability company is organic		92-0538382		
MARCH 1, 2023				
	(Date first transacted business in Florids, if prior to r (See sections 605.0904 & 605.0905, F.S. to determine	egistration.) ne penalty liability)		
1621 CENTRAL AVE		6. (Mailing Address)		
CHEYENNE, WY 82001		BOCA RATON, FL 33431		
Name and street address	s of Florida registered agent: (P.O. Box	NOT acceptable)	2023 HAY	
Name:	CORPORATION SERVICE COMPAN	<b>1</b> Y	Y 23	
	1201 HAYS STREET	<del></del>	$\geq$	
Office Address:			ထ္	

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.

(Registered agent's signature)

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:	Title or Capacity	:	Name and Address:
■Manager	Name: CAROLINE VAN SCHELTING	<b>≅</b> Manager	Name:	
≣Member	Address: 3700 AIRPORT ROAD	□Member		
<b>■</b> Authorized	STE 406	□Authorized		
Person	BOCA RATON, FL 33431	Person		
Other	Other	□Other		Other
□Manager	Name: WILLIAM CERUTTI	□Manager	Name:	
□Member	Address: 3700 AIRPORT ROAD	□Member		
Authorized	STE 406	□Authorized		
Person	BOCA RATON, FL 33431	Person		
□Other	Other	□Other		□Other
□Manager	Name:	□Manager	Name:	
□Member	Address:	□Member	Address:	
□Authorized		□Authorized		
Person		Person		
Other	Other	□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

CAROLINE VAN SCHELTINGA

Typed or printed name of signee

## STATE OF WYOMING Office of the Secretary of State

I, CHUCK GRAY, Secretary of State of the State of Wyoming, do hereby certify that according to the records of this office,

#### Sundance Jetshare LLC

is a

#### **Limited Liability Company**

formed or qualified under the laws of Wyoming did on **July 6, 2022**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2022-001134254**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 18th day of May, 2023 at 1:21 AM. This certificate is assigned ID Number 060976123.

Secretary of State

Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website https://wyobiz.wyo.gov and following the instructions displayed under Validate Certificate.

## STATE OF WYOMING \* SECRETARY OF STATE BUSINESS DIVISION

Herschler Bldg East, Ste.100 & 101, Cheyenne, WY 82002-0020 Phone: 307-777-7311 · Website: https://sos.wyo.gov · Email: business@wyo.gov

#### Validation of Certificate of Good Standing for Certificate Issued 05/18/2023

Validation Certificate Generated: May 18, 2023

Certificate number 060976123 is a valid number for a certificate of good standing issued by the Wyoming Secretary of State's office for **Sundance Jetshare LLC**, a **Limited Liability Company** formed or qualified under the laws of Wyoming on **07/06/2022**.