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From:

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Account Number : 075350000065
Phone : (954)525-7500
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Foreign Limited Liability Company JAWCO AVIATION LLC

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H23000333208

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 I. JAWCO AVIATION LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") If name unavailable, enter atternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "EL C," or "ELC.") DELAWARE (FEI number, il applicable) 2. (Purisdiction under the law of which foreign limited liability company is organized) (Date first innesoted business in Floride, if prior to registration.) (See excitors 603,0904 & 603,0903, F.S. to determine penelty liability) 1904 S.W. 6TH AVE 1904 S.W. 6TH AVE 6. (Mailing Address) (Street Address of Principal Office) OKEECHOBEE, FL 34974 OKEECHOBEE, FL 34974 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) GREGORY A. MCLAUGHLIN, ESQ. Name: 110 SE 6TH STREET, 15TH FLOOR Office Address: FORT LAUDERDALE , Florida _ (Cay)

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.

Gragory A. McLaughlin, Cag.

H23000333208

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	Title or Capacity:	
Manager	Name: JOHN WILCOX, JR.	□Manager	Name:	
 ⊡Member	Address:	□Member	Address:	
□Authorized	OKEECHOBEE, FL 34974	□Authorized		
Person		Person		
□Other	Other	□Other		□ Other
□Manager	Name:	□Manager	Name:	
□Member	Address:	□Momber	Address:	
□Authorized		□ Authorized		
Person		Person		
□Other		□Other		Other
□Monager	Name:	□Manager	Name:	
□Member	Address:	□Member	Address: _	
□Authorized		Authorized		
Person		Persor:		
□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 cortificate 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 cortificate is in a foreign language, a trunslation of the certificate under each 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.

GREGORY A. MCLAUGHLIN, ESQ., AUTHORIZED REPRESENTATIVE

Gragory A. McLaughlin, Cag.

Typed or printed name of signer

H23000333208



Page 1

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

DELAWARE, DO HEREBY CERTIFY "JAWCO AVIATION 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-FIRST DAY OF SEPTEMBER, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "JANCO AVIATION LLC" WAS FORMED ON THE FOURTEENTH DAY OF SEPTEMBER, A.D. 2023.

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

Authentication: 204215461

Date: 09-21-23