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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**TRANSMITTAL LETTER**

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-01/20/00--01017-001  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

**SUBJECT: SMATHERS AVIATION, INC.**

Enclosed is an original and one (1) copy of the Articles of Incorporation and our check for \$70.00.

**FROM: WILLIAM T. SMATHERS  
4909 TIDE DRIVE  
MILTON, FLORIDA 32583**

1/21/00 ✓

**ARTICLES OF INCORPORATION  
OF  
SMATHERS AVIATION, INC.**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation:**

**ARTICLE I: NAME**

**The name of the Corporation shall be:  
SMATHERS AVIATION, INC.**

**ARTICLE II: PRINCIPAL OFFICE**

**The principal place of business and mailing address of this Corporation shall be:  
4909 TIDE DRIVE  
MILTON, FLORIDA 32583**

**ARTICLE III: SHARES**

**The number of shares of stock that this Corporation is authorized to have outstanding at any one time is:  
TWO HUNDRED FIFTY SHARES**

**ARTICLE IV: REGISTERED AGENT AND STREET ADDRESS**

**The name and address of the initial registered agent are:  
WILLIAM T. SMATHERS  
4909 TIDE DRIVE  
MILTON, FLORIDA 32583**

**ARTICLE V: INCORPORATOR**

**The name and street address of the incorporator to these Articles of Incorporation are:**

**WILLIAM T. SMATHERS  
4909 TIDE DRIVE  
MILTON, FLORIDA 32583**

**The undersigned incorporator has executed these Articles of Incorporation this TWENTY-FIRST (21ST) day of JANUARY, 2000.**

  
**WILLIAM T. SMATHERS**

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**CERTIFICATE OF DESIGNATION  
REGISTERED AGENT / REGISTERED OFFICE**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Pursuant to the provisions of Sections 607.0501 or 617.0501, Florida Statutes, the undersigned Corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/agent in the State of Florida:

1. The name of the Corporation is:  
**SMATHERS AVIATION, INC.**
2. The name and address of the registered agent and office are:  
**WILLIAM T. SMATHERS  
4909 TIDE DRIVE  
MILTON, FLORIDA 32583  
850-623-1665**

**HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, 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 RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATION OF MY POSITION AS REGISTERED AGENT.**

  
**WILLIAM T. SMATHERS**

01-21-00  
**DATE**