## PAODEMINIO DE 208

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

ALOBAL AVIATION MA	AFGENENT, INC.	
	801	00031629480 -03/08/0001103002 *****70.00 *****70.00
\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee File & Certified Copy C	\$87.50 iling Fee, Certified Copy c Certificate of tatus
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561 309 3	1728	FILED  ON MAR -8 MM 8: 08  SECRETARY OF STATE TALLAHASSEE FI OF STATE  TALLAHASSEE FI OF STATE  ON MAR -8 MM 8: 08
	(Proposed corpo  inal and one (1) copy of the article  \$78.75 Filing Fee & Certificate of Status  M: Dougles S. M.  Name (Proposed corpo  City,  \$76 / 309	inal and one (1) copy of the articles of incorporation and a che  \$78.75 Filing Fee & Certificate of Status  ADDITIONAL COPY I

NOTE: Please provide the original and one copy of the articles.



In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)
ARTICLE I NAME
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)  ARTICLE I NAME  The name of the corporation shall be: GLOBAL AVIATION MANAGEMENT, INC.  ARTICLE II PRINCIPAL OFFICE  The principal place of business/mailing address is: 222 LANGUEW RIVE  SULTE 160-292
ARTICLE II PRINCIPAL OFFICE
The principal place of business/mailing address is: 222 LAKEVIEW NEWE SUITE 160-292 WEST NAM BEACH, FLA 33401
ARTICLE III PURPOSE
The purpose for which the corporation is organized is: AVIATION AND AIRCRAFT WANTED
ARTICLE IV SHARES
The number of shares of stock is: 100
ARTICLE V INITIAL OFFICERS DIRECTORS The name(s) and address(es):
ARTICLE VI REGISTERED AGENT  The name and Florida street address registered agent are: Douglas & WATTHEWS  2887 POLO IS CAND ONLY  WELLINGTON, FLA 33414
The name and address of the Incorporator are: Doubling & Midthelias  2882 1060 15CHWO ORIUE  WELLINGTON, FLA 3344
*************************************
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 obligations of my position as registered agent.
Signature/Régistèred Agent  Out  3/4/06  Date  3/4/0
\$ignature/Incorporator Date