

Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number : (850) 922-4001

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255

Phone

: (305)541-3694

Fax Number

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FLORIDA PROFIT CORPORATION OR P.A.

BLUE SKY FLYONG INC.

Certificate of Status	0
Certified Copy	1
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ARTICLES OF INCORPORATION

ARTICLE I - NAME

The name of the corporation is BLUE SKY FLYING INC.

ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation are:

1141 S. E. Second Avenue, Fort Lauderdale, FL 33316

ARTICLE III - SHARES

The number of share of stock that this corporation is authorized to have outstanding at any one time is 100 shares of common stock having a \$1.00 par value.

ARTICLE IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

Thane name and address of the initial registered agent are:

LAWRENCE J. BOHANNON 1141 S.E. Second Avenue Fort Lauderdale, FL 33316

ARTICLE V - INCORPORATOR

The name and address of the incorporator executing these Articles of Incorporation is :

LAWRENCE J. BOHANNON 1141 S.E. Second Avenue Fort Lauderdale, FL 33316

The undersigned has executed these Articles of Incorporation this 27 day of August,

2000.

AWRENCE I. BOHANNON

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DESIGNATION AND ACCEPTANCE OF REGISTERED AGENT FOR A FLORIDA CORPORATION

Pursuant to the provisions of F.S. 607.0501, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent in the State of Florida.

- The name of the corporation is BLUE SKY FLYING INC.
- The name of the registered agent is LAWRENCE J. BOHANNON.
- 3. The address of the registered agent/registered office is 1141 S.E. Second Avenue, Fort Lauderdale, 33316.

ACCEPTANCE

Having been named as registered agent and designated to accept service of process for the above corporation, 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.

REGISTERED AGENT

SWORN TO AND SUBSCRIBED

before me this 27 day of August, 2000.

NOTARY PUBLIC

My Commission Expires:

Nichole L Schofeti
*My Commission CC848626
*Expired June 1, 2001

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