

PO0000099407

Florida Department of State
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To:
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Fax Number : (850) 922-4001

From:
Account Name : FALLACE & ASSOCIATES, P.A.
Account Number : I20000000191
Phone : (321) 951-9900
Fax Number : (321) 724-6002

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA PROFIT CORPORATION OR P.A.

Air Quest, Inc.

Certificate of Status	0
Certified Copy	1
Page Count	1 2
Estimated Charge	\$78.75

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ARTICLES OF INCORPORATION

OF

AIR QUEST, INC.

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act ("Act"), hereby adopts the following Articles of Incorporation.

ARTICLE I

NAME

The name of this corporation shall be: Air Quest, Inc.

ARTICLE II

PRINCIPAL OFFICE

The principal office address of this Corporation is 15 Windjammer Point, Merritt Island, Florida, 32952. The mailing address of this Corporation is 1861 South Patrick Drive, PMB 115, Indian Harbour Beach, Florida 32937.

ARTICLE III

PURPOSE

This Corporation is formed to engage in providing aviation services and to engage in any other activities allowed by the Act or under the laws of the State of Florida and the United States.

ARTICLE IV

CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at one time is 1,000 shares.

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ARTICLE VREGISTERED OFFICE AND AGENT

The address of the initial registered office of this Corporation is Fallace & Associates, P. A., 1900 S. Hickory Street, Suite A., Melbourne, Florida 32901. The name of the initial registered agent at that address is James H. Fallace.

ARTICLE VIINCORPORATOR


The name and address of the initial incorporator is as follows: Timothy L. Childrey, 15 Windjammer Point, Merritt Island, Florida, 32952.



Timothy L. Childrey, Incorporator

Date: October 20, 2000

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 and 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.



James H. Fallace, Registered Agent

Date: October 20, 2000SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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