

TRANSMITTAL LETTER

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

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-03/12/01--01117--007
*****87.50 *****87.50

SUBJECT: Avior Aerospace Consultants & Services, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☒ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Debra H. Schilling
 Name (Printed or typed)

22421 Swordfish Drive
 Address

Boca Raton, Florida 33428
 City, State & Zip

(561) 852-6311
 Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 MAR 12 AM 9:54

FILED

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

E. CHESLER

MAR 1 5 2000

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

Avior Aerospace Consultants & Services, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

22421 Swordfish Drive

Boca Raton, Florida 33428

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Aircraft Maintenance and Parts Suppliers

ARTICLE IV SHARES

The number of shares of stock is:

One Hundred (100) Shares

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

President, Debra H. Schilling

22421 Swordfish Drive, Boca Raton, Florida 33428

Vice President, John Romaine

15405 Miami Lakeway N., Unit# 209, Miami Lakes, Florida 33014

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

John Romaine

15405 Miami Lakeway N., Unit# 209

Miami Lakes, Florida 33014

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Debra H. Schilling

22421 Swordfish Drive

Boca Raton, Florida 33428

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent John Romaine

March 9, 2001
Date

Signature/Incorporator Debra H. Schilling

March 9, 2001
Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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