

PD2000127501

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

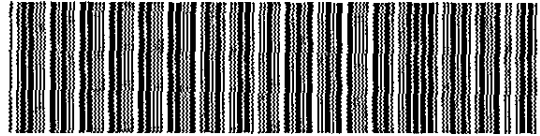
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AUTHORIZATION BY PHONE TO
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DATE *10/14*
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off date 1-1-03

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12-04-03
[Signature]

TRANSMITTAL LETTER

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

SUBJECT: Cypress Air, INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

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

ADDITIONAL COPY REQUIRED

FROM Micah I. R. McCorkle
Name (Printed or typed)

2450 Cypress Parkway
Address

Haines City, FL 33874
City, State & Zip

863-421-4315
Daytime Telephone number

off date 1-1-03

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

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:

Cypress Air, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2450 Cypress Parkway
Haines City, FL 33844

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

For-Profit Corporation

ARTICLE IV SHARES

The number of shares of stock is:

1

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

Micah F.R. McCorkle (P)
2450 Cypress Parkway
Haines City, FL 33844

Joanne McCorkle (VP)
2450 Cypress Parkway
Haines City, FL 33844

ARTICLE VI REGISTERED AGENT

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

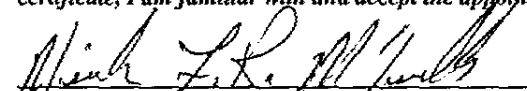
Micah F.R. McCorkle
2450 Cypress Parkway
Haines City, FL 33844

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Micah F.R. McCorkle
2450 Cypress Parkway
Haines City, FL 33844

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

11-19-02

Date



Signature/Incorporator

11-19-02

Date

ARTICLE VIII Effective Date 1/1/03

EXPIRATION DATE
01-01-03

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STATE OF FLORIDA