2005 FOR PROFIT CORPORATION REINSTATEMENT

FILED

2005 OCT 10 PM 12: 03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P03000020344

1. Entity Name
AIR AMERICA, INC.

Principal Place of Business
7131 QUEEN PALM CIRCLE
SARASOTA, FL 34243

Mailing Address
7131 QUEEN PALM CIRCLE
SARASOTA, FL 34243

10052005 REIN-P CR2E098 (6/04)

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 47-0915230 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
OZARK, DAMIAN M
2508 MANATEE AVENUE WEST
BRADENTON, FL 34205

7. Name and Address of New Registered Agent
Name: Deanne Babcock
Street Address (P.O. Box Number is Not Acceptable): 7131 Queen Palm Cir
City: Sarasota FL Zip Code: 34243

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Deanne M Babcock (Signature, typed or printed name of registered agent and title if applicable) DATE: 10-5-05
(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After January 1, 2006, Fee will be $300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BABCOCK, DEANNE M 7131 QUEEN PALM CIRCLE SARASOTA, FL 34243	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 9000060454229 10/10/05--01067--006 **158.75
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SALZANO, MATTHEW D 6324 24TH STREET COURT EAST BRADENTON, FL 34203	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Deanne M Babcock (SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR) 10/5/05 (Date) 941-737-3557 (Daytime Phone #)

10/12 [illegible]