(Requestor's Name)	
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(City/State/Zip/Phone #)	
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(Business Entity Name)	
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TRANSMITTAL LETTER

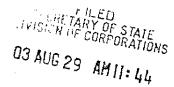
Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: TWD	Aircraft Maintenance Repr	esentation, Inc.	
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the arti	icles of incorporation and	a check for:
\$70.00	☑ \$78.75	□ \$78.75	\$87.50
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
•	& Certificate of Status	& Certified Copy	Certified Copy
			& Certificate of
		l	Status
		ADDITIONAL CO	PY REQUIRED
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FROM: S	aenz & Associates, Inc CPA	√S 	
	Name	(Printed or typed)	
	8180 NW 36th Street suite	e 100	
,		Address	
	Miami Fl. 33166		
	City	, State & Zip	
	305 796 9600		
		Telephone number	

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:

TWD Aircraft Maintenance Representation, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 9806 SW 222 Terrace Miami FI. 33190

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Provide aircraft maintenance representation

ARTICLE IV SHARES

The number of shares of stock is: 7500 @ \$1.00 per share

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): Todd W. Davis President 9806 SW 222 Terrrace Miami, Fl. 33190

ARTICLE VI REGISTERED AGENT

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

Raul M. Saenz CPA 8180 NW 36th Street Suite 100 Miami, Fl. 33166

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Todd W Davis 9806 SW 222 Terrace Miami, Fl. 33190