

P03000128560

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

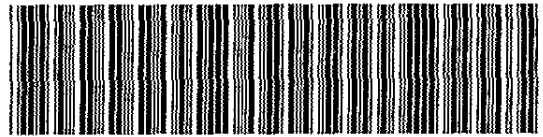
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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# TRANSMITTAL LETTER

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

SUBJECT: ISLAND AVIATION HOLDINGS  
(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: ONEIL McDONNOUGH  
Name (Printed or typed)

2777 SW 129 AVE  
Address

MIRAMAR FL 33027  
City, State & Zip

754-244-3487  
Daytime Telephone number

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

Andrew Williams GAVE  
AUTHORIZATION BY PHONE TO  
Article  
CORRECTIVE, IV & VI  
DATE 11-7-03  
DOC. EXAM Vail

# 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: *ISLAND Aviation Holdings Inc*

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: *2777 S.W. 129 AVE*  
*Same* *MIRAMAR FL 33027*

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is: *PROFIT - AIRCRAFT parts and support*  
*Sales*

## ARTICLE IV SHARES

The number of shares of stock is: *100*

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

*ONEIL M McDonough*  
*2777 S.W. 129 Avenue*  
*MIRAMAR, FL*  
*33027*

## ARTICLE VI REGISTERED AGENT

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

*Oneil McDonough*  
*2777 S.W. 129 Ave.*  
*MIRAMAR FL 33027*

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

*Oneil M McDonough*  
*2777 Sw 129 AVE*  
*Miramar FL 33027*

\*\*\*\*\*

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]*  
\_\_\_\_\_  
Signature/Registered Agent

*11/03/03*  
\_\_\_\_\_  
Date

*[Signature]*  
\_\_\_\_\_  
Signature/Incorporator

*11/03/03*  
\_\_\_\_\_  
Date

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED