

P05000146695

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

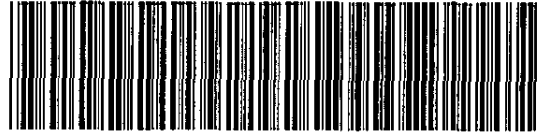
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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J. SHIVERS
TAL. SEC. FID.

J. Shivers NOV 02 2005

COVER LETTER

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

SUBJECT: Aviation Management Solutions

(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: John C. Willis III

Name (Printed or typed)

4515 Cheval Blvd

Address

Lutz, FL 33558

City, State & Zip

813 949 9391

Daytime Telephone number

RECEIVED
TALLAHASSEE
FL 32314

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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:

Aviation Management Solutions, inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

4515 Cheval Blvd

Lutz, FL 33558

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Provide Aviation and FBO management services.

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):

Virginia K. Willis - Chairwoman

John C. Willis III - President

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

John C. Willis III

4515 Cheval Blvd

Lutz, FL 33558

ARTICLE VII INCORPORATOR

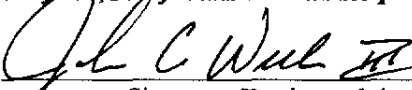
The name and address of the Incorporator is:

John C. Willis III

4515 Cheval Blvd

Lutz, FL 33558

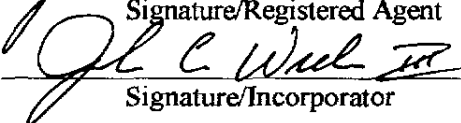
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

10/25/2005

Date



Signature/Incorporator

10/25/2005

Date

CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

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