

P10000033780

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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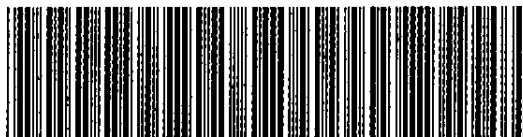
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/19/10--01025--014 **78.75

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10 APR 19 AM 10:54

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9

4-20-10

COVER LETTER

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

SUBJECT: FLAGLER AIR EXCHANGE 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: FLAGLER AIR EXCHANGE INC / JOSHUA ROSA

Name (Printed or typed)

241 OLD MOODY BLVD

Address

PALM COAST, FLORIDA 32164

City, State & Zip

386-586-8248

Daytime Telephone number

AIRCRAFTSALZ@AOL.COM

E-mail address: (to be used for future annual report notification)

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:

FLAGLER AIR EXCHANGE INC

ARTICLE II PRINCIPAL OFFICE

The principal ~~street~~ address and mailing address, if different is:

241 OLD MOODY BLVD

PALM COAST, FLORIDA 32164

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ALL OR ANY LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

JOSHUA ROSA 19 RIDLEY LN PALM COAST FLORIDA 32164 PRESIDENT

ARTICLE VI REGISTERED AGENT

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

JOSHUA ROSA

19 RIDLEY LN

PALM COAST FLORIDA 32164

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JOSHUA ROSA

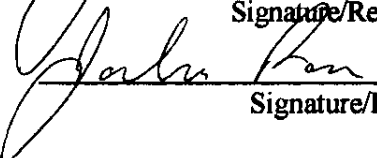
19 RIDLEY LN

PALM COAST FLORIDA 32164

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



Signature/Incorporator

04/12/2010

Date

04/12/2010

Date

FILED
10 APR 19 AM 10:54
SECRETARY OF STATE
PALM BEACH, FLORIDA