# Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name

: BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.

Account Number: 075350000353

: (212)431-5000

Phone Fax Number

: (212)431-1441

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Enail	Address:	<u> </u>

## FLORIDA PROFIT/NON PROFIT CORPORATION PAM Air-Florida, Inc.

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## 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: PAM Air-Florida, Inc.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: P.O.Box 448
701 Park Place
Long Beach, NY 11561

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To transact any and all lawful activity for which a corporation my be formed.

#### ARTICLE IV \_ SHARES

The number of shares of stock is: 1,000

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

L. Chip Ross c/o PAM Air-Florida, Inc., Group P.O.Box 448 701 Park Place Long Beach, NY 11561

#### ARTICLE VI REGISTERED AGENT

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

BLUMBERGEXCELSIOR CORPORATE SERVICES, INC. 155 Office Plaza Drive, 1st Fl. TALLAHASSEE, FL 32301

#### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Ana Malsonave 62 White St, 2nd Fl New York, N.Y. 10013

	# 4 # # # # # # # # # # # # # # # # # #	
Having be	en named as registered agent to accept service of process for the above stated corporation at the pl	ace designated in this
certificate,	I am familiar with and accept the appointment as registered agent and agree to act in this capacity	
Asst.	Secretary José Mojica	

Signature/Registered Agen

Jan. 27, 2012 Date

Jan. 27, 2012

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\_ Cha\_YYY

Signature/Incorporator

Y

Date