## PH000067662

(Requestor's	s Name)		
(Address)			
(Address)			
(City/State/Z	Zip/Phone #)		
PICK-UP V	VAIT MAIL		
(Business E	Intity Name)		
(Document Number)			
Certified Copies Ce	ertificates of Status		
Special Instructions to Filing Of	ficer:		





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W14-45607

## **COVER LETTER**

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

SUBJECT: Aviation Investments, 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  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status  PY REQUIRED		

M٠	Larry W Addison
٧1.	Name (Printed or typed)
	1200 NW 48 TH PL
•	Address
	Pompano Beach, Florida 33064
٠	City, State & Zip
	954-663-4311
•	Daytime Telephone number
_	Fightersp51@hotmail.com
-	E-mail address: (to be used for future annual report notification

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

## FLORIDA DEPARTMENT OF STATE Division of Corporations

P. T. AUG 11 FE 3: UD
SECRE TALLAHASSELLE OF 19

July 24, 2014

LARRY W ADDISON 1200 NW 48TH PL POMPANO BEACH, FL 33064

SUBJECT: AVIATION INVESTMENTS, INC.

Ref. Number: W14000045507

We have received your document for AVIATION INVESTMENTS, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Jessica A Fason Regulatory Specialist II

Letter Number: 414A00015950

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

name of the corpo			
TICLE II PI	RINCIPAL OFFICE Principal <u>street</u> address	Mailing ad	ldress, if different is:
200 NW 48	th PL		
ompano Be	each, Florida 33064		
<u>.</u>		·	
TICLE III PU	IRPOSE  h the corporation is organized is:		
purpose for wine.	in the corporation is organized is.		
			· · · · · · · · · · · · · · · · · · ·
TICLE IV SI	HARES 1,000		
TICLE IV SI	HARES of stock is:		
TICLE V II	VITIAL OFFICERS AND/OR DIREC	TORS	14 AUG -
TICLE V II	vitial officers and/or direc itle: Larry W Addison	<b>TORS</b> Name and Title:	7 A 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
TICLE V II	NITIAL OFFICERS AND/OR DIRECT itle: Larry W Addison 1200 NW 48th PL	Name and Title:	
TICLE V II  Name and T	Larry W Addison  1200 NW 48th PL  Pompano Beach, Flor	Name and Title:	7. 20 7. 20
TICLE V II  Name and T	NITIAL OFFICERS AND/OR DIRECT itle: Larry W Addison 1200 NW 48th PL	Name and Title:	7
Name and T Address	Larry W Addison  1200 NW 48th PL  Pompano Beach, Flor	Name and Title:  Address:  ida	700 H 700 T
Name and T Address	Larry W Addison 1200 NW 48th PL Pompano Beach, Flor 33064	Name and Title: Address: ida Name and Title:	700 H 700 T
Name and T Address  Name and Ti	PATTAL OFFICERS AND/OR DIRECT itle: Larry W Addison 1200 NW 48th PL Pompano Beach, Flor 33064	Name and Title: Address: ida Name and Title:	AUG 11 8H 7: 27
Name and T Address  Name and Ti	Partial officers AND/OR DIRECT itle: Larry W Addison 1200 NW 48th PL Pompano Beach, Flor 33064	Name and Title: Address:  ida  Name and Title: Address:	700 THE TOTAL TOTA
Name and T Address  Name and Ti	Larry W Addison 1200 NW 48th PL Pompano Beach, Flor 33064	Name and Title: Address:  ida  Name and Title: Address:	AUG 11 8H 7: 27
Name and T Address  Name and Ti Address	Partial officers AND/OR DIRECT itle: Larry W Addison 1200 NW 48th PL Pompano Beach, Flor 33064	Name and Title:  Address:  Name and Title:  Address:	106 T
Name and T Address  Name and Ti Address	Partial officers AND/OR DIRECT itle: Larry W Addison 1200 NW 48th PL Pompano Beach, Flor 33064	Name and Title:  Address:  Ida  Name and Title:  Address:  Name and Title:  Name and Title:	106 T

Name an	d Title:	Name and Title:	
Address		Address:	
ARTICLE VI	REGISTERED AGENT		
The <u>name and Fl</u>	orida street address (P.O. Box NOT acceptable) of	the registered agent is:	Starry -
Name:	Larry W Addison		
Address:	1200 nw 48th pl		<b>30 5 11</b>
	Pompano Beach, Florida 33064		
ARTICLE VII	INCORPORATOR		17:2
The name and ad	Idress of the Incorporator is:		असं व्ह
Name:	Larry W Addison		
Address:	1200 nw 48 pl		
	Pompano Beach, Florida 33064		
	ned as registered agent to accept service of process am familiar with and accept the appointment as reg		in this capacity
Daw	a Cid.		07/16/2014
	Required Signature/Registered Agent		Date
	ument and affirm that the facts stated herein are to Department of State constitutes a third degree felony		
of Wall.			07/16/2014
frey !	Required Signature/Incorporator	<del></del>	Date