## P160000028613

(Re	questor's Name)				
, , ,					
(Ad	(Address)				
(Ad	ldress)				
(Cid	ty/State/Zip/Phon	e #)			
· D PICK-UP	☐ WAIT	☐ MAII			
(Bu	siness Entity Na	me)			
(Do	ocument Number	)			
Certified Copies	_ Certificate	s of Status			
Special Instructions to Filing Officer:					





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16 MAR 25 PH 2: 39
SECRETARY OF STATE

144

## **COVER LETTER**

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

SUBJECT: Sky	yWarrior Avionics Inc.			
SUBJECT:	(PROPOSED CORPORA	TE NAME – MUST INCL	UDE SUFFIX)	
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	d a check for:	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	& Certificate o Status	
		ADDITIONAL CO	PY REQUIRED	
FROM:	Judith Lightfoot Name	e (Printed or typed)		
	4211 Maygarden Rd			
		Address		
	Pensacola, FL 32504			
	City,	State & Zip		
	(850) 433-6114			
	Daytime T	elephone number		
	judi@skywarriorinc.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)

16 MAR 25 PM 2: 39 SkyWarrior Avionics Inc.

ARTICLE I N. The name of the co	<u>AME</u> rooration shall be	SkyWarrior	Avionics Inc.	TO THAN 25 PM 2: 39
ARTICLE II P	<u>RINCIPAL OFF</u>			SECRETARY OF STATE TALL AHASSEF FLORIDA  Mailing address, if different is:
4211 Maygarder	ı Rd			·
Pensacola, FL 3	2504		_	
ARTICLE III Portion of the purpose for window		on is organized is:	To provide aircraft	avionics sales, service and repairs.
	res of stock is:	RS AND/OR DIRECT B Sigler, President		Gregory B. Sigler, Vice-President
Name and	i i ilie:	aygarden Rd	Name and	Title:4211 Maygarden Rd
Address _	Pensac	ola, FL 32504	Address:	Pensacola, FL 32504
Name and	Judith E	Lightfoot, Secretary	Name and	Title:
Address		avoarden Rd	Address:	THO.
	Pensac	ola, FL 32504	- Addioso.	
		•	<u> </u>	Title:
Address				

## FILED

Name and T	Title:		25 PM 2: 39
Address		Address: TALLAHAS	RY OF STATE SSEE FLORIDA
	<del> </del>		JOEL I LORIUD
	GISTERED AGENT ida street address (P.O. Box NOT acceptable)	of the registered agent is:	
Name:	George B Sigler	of the registered agent is.	
Address:	4211 Maygarden Rd	<del></del>	
Address.	Pensacola, FL 32404	<del></del>	
ARTICLE VII IN	<u>CORPORATOR</u>		
The name and addr	ess of the Incorporator is:		
Name:	Judith E Lightfoot		
Address:	4211 Maygarden Rd		
	Pensacola, FL 32504	<del></del>	
	e is listed, the date must be specific and can	(OPTIONAL not be more than five busine	•
	serted in this block does not meet the applicab ctive date on the Department of State's records		s, this date will not be listed as
	l as registered agent to accept service of proce familiar with and accept the appointment as i		
		~	3/22/2016
	Required Signature/Registered Agent		Date
	ent and affirm that the facts stated herein a partment of State constitutes a third degree fel		
Q	you La Gid you	<del></del>	3/22/16