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 Phone : (800)221-2972

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Lighthouse Aviation Inc

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Corporate Filing Menu

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ARTICLES OF INCORPORATION

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

ARTICLE II — PRII				
	NCIPAL OFFICE Principal street address	Mailing address, if different is:		
926 Penn Trail		926 Penn Trail		
Jupiter, FL 33458		Jupiter, FL 33458	1	
ARTICLE III PUR The purpose for which may be formed.	POSE n the corporation is organized is: To transact	any and all lawful activity	for which a corporation	
ARTICLE IV SHA The number of shares of	of stock is:		17 MAY	
	IAL OFFICERS AND/OR DIRECTORS (le: Carol-Lynn Throop - Director	Name and Wales	5 5 14	
Address	926 Penn Trail	Name and Title: Address:	**************************************	
	Jupiter, FL 33458			
Name and Titl	John Joseph Anterlomenica Sr Director	Name and Title:		
Name and Titl	e:			
	e:			
	e: John Joseph Antedomenico Sr - Director 525 Quail Point	Address:		
Address	e: John Joseph Antedomenico Sr - Director 525 Quail Point	Address:		
Address	e: John Joseph Antedomenico Sr - Director 525 Quail Point Jupiter, FL 33458	Address: Name and Title:		

Name a	nd Title:	Name and Title:	Name and Title:		
Addres	ss	Address:	Address:		
		and the second s			
	<u>REGISTERED AGENT</u> Florida street address (P.O. Box NOT a	cceptable) of the registered agent is:			
Name:	Carol-Lynn Throop				
Address:	926 Penn Trail				
	Jupiter, FL 33458	order or other than the state of the state o			
ARTICLE YII	JNCORPORATOR		7 HAY		
The name and a	ddress of the Incorporator is:		क क		
Name:	Carol-Lynn Throop		17 17 17 17 17 17 17 17 17 17 17 17 17 1		
Address:	926 Penn Trail		Ç. Ç.		
	Jupiter, FL 33458		₽ 1 >		
Effective date, if	EFFECTIVE DATE: other than the date of filing: date is listed, the date must be specific				
	e inserted in this block does not meet the iffective date on the Department of State		s, this date will not be listed as		
Having been m this verdicate.	uned us registeradingent to que ent service of I am familiae with and accept the appointmen	process for the above stated corporation at it is registered again and agree to act in this	the place designated in scapacity		
V //	Recurred Stanture/Registered Age		1/2017		
I submit this do	required and affirm highlin facts stated hum	tin are true. I am aware that the fulse info	Date conation submitted in a		
J	CH fut	ee felouy as provided for in 1, 817.155, F.S. 05/1	11/2017		
Keq	ired Signature Incorporator		Date		