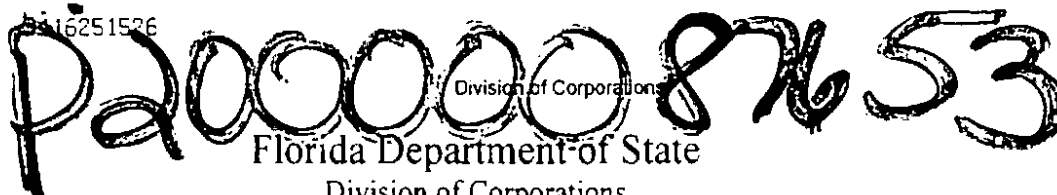


11/12/2020



Florida Department of State

Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : WILSON TAX & ACCOUNTING INC.
Account Number : 120150000107
Phone : (941) 625-1925
Fax Number : (941) 625-1526

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

Email Address: connielovescoffee@gmail.comFLORIDA PROFIT/NON PROFIT CORPORATION
CRITICAL AIR SERVICES CORPORATION

Certificate of Status	0
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Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF INCORPORATION

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

ARTICLE I NAMEThe name of the corporation shall be: CRITICAL AIR SERVICES CORPORATION**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

5305 NW 108TH AVE5305 NW 108TH AVESUNRISE, FL 33351SUNRISE, FL 33351**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS.

2008 NOV 12 PM 2:59

ARTICLE IV SHARESThe number of shares of stock is: 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: CONNIE VASEY Name and Title: _____Address: PRESIDENT Address: _____12444 CLASSIC DRCORAL SPRINGS, FL 33071

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

_____**ARTICLE VI REGISTERED AGENT**The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:Name: CONNIE VASEYAddress: 12444 CLASSIC DRCORAL SPRINGS, FL 33071FILED
2020 NOV 12 PM 2:59
CLERK**ARTICLE VII INCORPORATOR**The **name and address** of the Incorporator is:Name: CONNIE VASEYAddress: 12444 CLASSIC DRCORAL SPRINGS, FL 33071**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.*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*Connie Vasey

Required Signature/Registered Agent

11-12-2020

Date

*I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.*Connie Vasey

Required Signature/Incorporator

11-12-2020

Date