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## 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 Fax Number : (917)243-5343

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

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## FLORIDA PROFIT/NON PROFIT CORPORATION SKYVIEW AIRCRAFT SERVICES CORP

Certificate of Status	0
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Electronic Filing Menu

Corporate Filing Menu

Help

1 DENNIS

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

Principal of street address Principal street address PAIRWAY DRIVE APT. 158		Mailing addr 7385 FAIRWAY DR	Mailing address, if different is: 7385 FAIRWAY DRIVE APT, 158	
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Name and	l Title:	Name and Title:	
Address		Address;	
ARTICLE VI - R	REGISTERED AGENT		
	orida street address (P.O. Box NOT acceptable)	of the registered agent is:	
Name:	JOSEPH PRAINITO	<u> </u>	
Address:	7385 FAIRWAY DRIVE APT. 158		
	MIAMI LAKES, FL 33014		
ARTICLE VII	NCORPORATOR		
The name and ad	dress of the Incorporator is:		
Name:	JOSEPH PRAINITO		
Address:	7385 FAIRWAY DRIVE APT. 158		
	MIAMI LAKES, FL 33014	<del></del>	
APTICI E VIII	EFFECTIVE DATE:		
Effective date, if	other than the date of filing:	(OPTIONAL)	
(If an effective days after the fili	ite is listed, the date must be specific and can	not be more than five business days prior or	r 90 business
-	inserted in this block does not meet the applicab	the statutory filing requirements, this date will r	not be listed as
	fective date on the Department of State's record		ior de fisica as
Having been nam	ed as registered agent to accept service of proce	ess for the above stated corporation at the pla	ce designated in
this certificate, I a	m familiar with and accept the appointment as	registered agent and agree to act in this capaci	'ny
dize it.	Vacani	03/05	12021
7	Required Signature/Registered Agent		)ate
	iment and affirm that the facts stated herein a		submitted in a
document to the L	epartment of State constitutes a third degree fel	ony as provided for in s.817.155, F.S.	
tingin	1 10 .0.	mah	5/2021
Requir	ed Signature/Incorporator		Date
Requir	ed Signature/Incorporator	<u>03/</u> 2	Date

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