

P22000003623

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

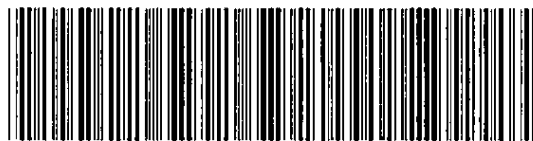
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer.

Office Use Only



200378371582

RECEIVED

2022 JAN 18 AM 11:57

TALLAHASSEE, FLORIDA

FILED

2022 JAN 18 PM 4:44

SUBJECT: STATE  
TALLAHASSEE, FL



**COGENCYGLOBAL**

115 N CALHOUN ST., STE. 4  
TALLAHASSEE, FL 32301  
**866.625.0838**  
COGENCYGLOBAL.COM

Date: **January 18, 2022**

Account#: I200000000088

Name: **David Shulman**

Reference #: **1574544**

Entity Name: **MAGNUS AIRCRAFT INCORPORATED**

☒ Articles of Incorporation/Authorization to Transact Business

☐ Amendment

☐ Change of Agent

☐ Reinstatement

☐ Conversion

☐ Merger

☐ Dissolution/Withdrawal

☐ Fictitious Name

☐ Other **Domestication and Incorporation**

**ISSUES? CALL**

**David:**

**850-270-0082**

Authorized Amount: **\$120.00**

Signature: *David Shulman*

Articles of Domestication  
Foreign Corporation Domesticating to Florida

The undersigned, Laszlo Boros, Chief Executive Officer  
(Name) (Title)

of Magnus Aircraft Incorporated, a foreign  
corporation, in accordance with s. 607.11922, Florida Statutes, submit these Articles of  
Domestication.

1. Then name of the domesticating corporation is Magnus Aircraft Incorporated  
(Foreign Corporation)

2. The jurisdiction and date of its formation is Virginia, 11/09/2017

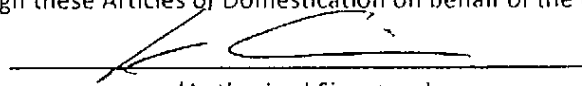
3. The name of the domesticated corporation is Magnus Aircraft Inc.

4. The jurisdiction of formation of the domesticated corporation is Florida

5. The domestication corporation is a foreign corporation and the domestication was  
approved in accordance with its organic law.

6. Attached are Florida Articles of Incorporation to complete the domestication  
requirements pursuant to s.607.0202, F.S.

I certify I am authorized to sign these Articles of Domestication on behalf of the corporation.

  
(Authorized Signature)  
Laszlo Boros, Chief Executive Officer

FILED  
2017 JAN 18 PM 4:44  
SECRETARY OF STATE  
TALLAHASSEE, FL

**ARTICLES OF INCORPORATION**  
*IN COMPLIANCE WITH CHAPTER 607, F.S.*

**ARTICLE I NAME**

THE NAME OF THE CORPORATION SHALL BE:

Magnus Aircraft Inc.

**ARTICLE II PRINCIPAL OFFICE**

THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS:

Principal Address

921 Biscayne Blvd E16

DeLand, FL 32724

Mailing Address

921 Biscayne Blvd E16

DeLand, FL 32724

**ARTICLE III PURPOSE**

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:

Aircraft manufacturing and sales

**ARTICLE IV SHARES**

THE NUMBER OF SHARES OF STOCK IS: 25000

**ARTICLE VI REGISTERED AGENT AND STREET ADDRESS**

THE **NAME AND FLORIDA STREET ADDRESS** (P.O. BOX NOT ACCEPTABLE) OF THE REGISTERED AGENT IS:

Cogency Global Inc.

115 North Calhoun Street, Suite 4

Tallahassee, FL 32301

HAVING BEEN NAMED AS REGISTERED AGENT AND 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.

Sheila Carroll  
Signature/Registered Agent

01/14/2017  
Date

Sheila Carroll, Assistant Secretary

FILED  
JAN 18 PM 4:44  
TALLAHASSEE, FL  
SECRETARY OF STATE

**ARTICLE V DIRECTORS AND/ OR OFFICERS**

*THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES:*

Name & Title: Laszlo Boros, Director  
President and CEO  
Address: Repuloter u 1  
HRSZ 08 8  
Magnus Aircraft  
Pogany, 7666 HUNGARY

Name & Title: Domonkos Andreka, Director  
General Manager, Secretary  
Address: 921 Biscayne Blvd E16  
DeLand, FL 32724

Name & Title: Judy Tarany-Pusztai, Director  
Address: 27784 Inverness  
Mission Viejo, CA 92692-1544

Name & Title: Robert Horvath, Director  
Chief Financial Officer, Treasurer  
Address: Ady Endre u 14/A  
Szentendre, 2000  
Hungary

Name & Title: Sandor Hazafi, Director  
Marketing and Sales Director  
Address: Repuloter u 1  
HRSZ 08 8  
Magnus Aircraft  
Pogany, 7666 HUNGARY

Name & Title: Michael F. Carothers, Director  
Quality Manager  
Address: 41951 Blue Flag Ter  
Aldie, VA 20105

Name & Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name & Title: \_\_\_\_\_  
Address: \_\_\_\_\_

I submit this document and affirm that the facts stated herein are true. I am aware that 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.



06/14/2022