



# THE COMPANY CORPORATION

Three Christina Centre • 201 N. Walnut Street • Wilmington, Delaware 19801 • Telephone (302) 575-0440 • Fax (302) 575-1346

February 3, 1995

Corporate Records Bureau  
Division of Corporations  
P.O. Box 6327  
Tallahassee FL 32314

400001407444  
0.7/11/95--01016--004  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

RE: Suncoast Aviation Inc.  
P3221055SUALL


Dear Sir or Madam:

Enclosed please find Articles of Incorporation, and our check(es) in the amount of \$70.00 for Suncoast Aviation Inc.

Please file at your earliest convenience and return confirmation to my attention at the address which is listed above.

Please feel free to contact me directly at 1-302-575-0440, ext. 208 with questions regarding the enclosed application.

Sincerely,

  
Kimberly Andras

enc.

*DMC*  
3/8/95

~~1195-3444~~

FILED  
95 MAR -7 AM 11:59  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

February 16, 1995

KIMBERLY ANDRAS  
THE COMPANY CORPORATION  
201 N WALNUT STREET  
WILMINGTON, DE 19801

SUBJECT: SUNCOAST AVIATION INC.  
Ref. Number: W95000003646

We have received your document for SUNC·AST AVIATION INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6923.

Doris McDuffie  
Corporate Specialist Supervisor

Letter Number: 995A00007119



# THE COMPANY CORPORATION

Three Christina Centre • 201 N. Walnut Street • Wilmington Delaware 19801 • Telephone (302) 575-0440 • Fax (302) 575-1346

March 2, 1995

Corporate Records Bureau  
Division of Corporations  
P.O. Box 6327  
Tallahassee FL 32314

RE: Aircraftsmen Inc.  
P3221055SUALL

Dear Sir or Madam:

Enclosed please find Articles of Incorporation, Your letter dated February 16 1995 and our check(es) in the amount of \$70.00 already received for Aircraftsmen Inc.

Please file at your earliest convenience and return confirmation to my attention at the address which is listed above.

Please feel free to contact me directly at 1-302-575-0440, ext. 208 with questions regarding the enclosed application.

Sincerely,

Kimberly Andras

enc.

ARTICLES OF INCORPORATION  
OF  
Aircraftsmen, Inc.

FILED

95 MAR -7 AM 11:59

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The undersigned natural person(s), of the age of 21 or more, acting to form a corporation under the corporate laws of the state of Florida do hereby certify the following:

FIRST: The name of the corporation shall be Aircraftsmen, Inc.

SECOND: The address of the initial registered office of the corporation is 200 - A John Knox Road, Tallahassee FL 32303-6643, County of Leon. The name of the registered agent located at said address is Larry Wolfe.

THIRD: The principal address of the corporation is 5510 Mariners Cove Drive, Jacksonville FL 32210.

FOURTH: The purpose for which this corporation is organized shall be to engage in any lawful act or activity for which corporations may be organized under the Florida Business Corporation Act.

FIFTH: The total authorized stock of this corporation is divided into 100 shares of no par value.

SIXTH: The number of directors constituting the initial board of directors is two, and the name(s) and address(es) who will serve as directors until the first annual meeting of shareholders or until their successors are as follows:

J. Wayne Allen and Charles F. Blalock, both of  
5510 Mariners Cove Drive, Jacksonville FL 32210

SEVENTH: The duration of the corporation is perpetual.

EIGHT: This is Close Corporation.

NINTH: The name(s) and address(es) of the persons who are to act as incorporator(s) are as follows:

Kimberly Andras c/o The Company Corporation  
Three Christina Centre, 201 N. Walnut St., Wilmington DE 19801

We (I), the undersigned, being all the incorporators of the corporation identified above, declare that we have examined the foregoing this 2nd day of February, 1995.

Kimberly Andras  
State of Delaware

County of New Castle

THE FOREGOING instrument was acknowledged and sworn to before me this 2nd day of February, 1995 by Kimberly Andras.

Susan M. Griffin  
Notary Public

This document was prepared by Kimberly Andras, Three Christina Centre, 201 N. Walnut Street, Wilmington DE 19801 (302) 575-0440

SUSAN M. GRIFFIN  
NOTARY PUBLIC - DELAWARE  
Appointed October 6, 1994  
Term 2 Years

95 MAR -7 AM 11:59


SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**In compliance with Section 607.1507, Florida Statutes, the following is submitted:**

First, this Aircraftmen, Inc.

desiring to organize under the laws of the state of Florida with its principal place of business located in the city of Jacksonville, State of Florida, has named Larry Wolfe located at 200 - A John Knox Road, Tallahassee FL 32303-6643 as its agent for service of process within Florida.

Having been named to accept service of process for the above stated corporation, at the place designated in this Certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties.

  
Larry Wolfe

Date \_\_\_\_\_

P95 000018918

WAYNE ALLEN  
5510 MARINERS COVE DR  
JACKSONVILLE, FL 32210  
904-771-9772

OFFICE USE ONLY

\$43.75

35.00 FEE

8.75 CERTIFICATE OF STATUS

MENT NUMBER(S) (if known):

AMENDMENT TO CHANGE  
NAME FROM: AIRCRAFTSMEN  
TO: RIVER CITY AIR CENTER

500001445495

(Document #)

04/03/95 04008--001

\* \*\*\*\*43.75 \*\*\*\*43.75

(Document #)

Wayne Allen

(Document #)

AUTHORIZATION BY THE BOARD

SECRETARY OF STATE

4-4-95

CERTIFIED COPY

DATE OF STATUS

☐ Mail out

☐ Will wait

☐ Photocopy

CC: EXAM

CERTIFICATE OF STATUS

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

95 MAR 31 PM 3:48  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

NAME  
Change  
4/4/95

Examiner's Initials

DR

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF INCORPORATION  
OF**

AIRCRAFTSMEN, INC.  
(present name)

Pursuant to the provisions of section 607.1006, Florida Statutes, this corporation adopts the following articles of amendment to its articles of incorporation:

**FIRST:** Amendment(s) adopted: (indicate article number(s) being amended, added or deleted)

CHANGE NAME FILED 3-7-95 Document # P95000018918  
TO: RIVER CITY AIR CENTER, INC.

**FILED**  
95 MAR 31 PM 3:48  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**SECOND:** If an amendment provides for an exchange, reclassification or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself, are as follows:

THIRD: The date of each amendment's adoption: 3-28-95 .

FOURTH: Adoption of Amendment(s) (CHECK ONE)

☒ The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) was/were sufficient for approval.

☐ The amendment(s) was/were approved by the shareholders through voting groups.

The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"The number of votes cast for the amendment(s) was/were sufficient for approval by \_\_\_\_\_ voting group."

☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Signed this day 28 of MARCH, 19 95.

Signature

Wayne Allen

(By the Chairman or Vice Chairman of the Board of Directors, President or other officer if adopted by the shareholder)

OR

(By a director if adopted by the directors)

OR

(By an incorporator if adopted by the incorporators)

WAYNE ALLEN

Typed or printed name

PRESIDENT

Title



# P95000018918

River City Air Center  
9102 Herlong Rd  
Jacksonville, FL 32210

7000001803847  
-05/01/96--01112--002  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

City/State/Zip

Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)

2. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)

3. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)

4. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)

☐ Walk in

☐ Pick up time \_\_\_\_\_

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
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<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

GA Chg.

VS MAY 10 1996

Examiner's Initials

Florida Department of State

Secretary of State

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT  
OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of FLORIDA submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1a. The name of the corporation is: RIVER CITY AIR CENTER, INC.1b. The mailing address of the corporation is: 9102 HERLONG ROAD  
JACKSONVILLE, FL 322101c. Date of incorporation: 3-7-95 Document number: P95000018918

2. The name and address of the current registered agent and office:

Larry Wolfe200 - A John Knox Rd.Tallahassee, FL 32303-6643

3. The name and address of the new registered agent and office: (P.O. Box Not Acceptable)

WAYNE ALLEN9102 HERLONG ROADJACKSONVILLE, FL 32210

The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.

  
(Signature of an officer, chairman or  
vice chairman of the board)4-2-95  
(Date)WAYNE ALLEN PRESIDENT  
(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

  
(Signature of Registered Agent)4-2-96  
(Date)FILED  
96 MAY -1 AM 8:17  
TALLAHASSEE FLORIDA  
SECRETARY OF STATE