P97000019401



ACCOUNT NO. : 672100000032

REFERENCE: 278439 9955A

AUTHORIZATION : Patrice

COST LIMIT : \$ 70.00

ORDER DATE: March 3, 1997

ORDER TIME : 9:32 AM

ORDER NO. : 278439-005

700002102477--6

CUSTOMER NO:

9955A

CUSTOMER: Ms. Margaret M. Pio

CHIUMENTO GUNTHARP EMERY &

ROTENBERG, P.A.

Suite B

4 Old Kings Road North Palm Coast, FL 32137

DOMESTIC FILING

NAME: FLAGLER SKIES, INC.

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION
CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY

PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: W. Charles Earnest

EXAMINER'S INITIALS:

K.R. MAR - 3 1997

ARTICLES OF INCORPORATION OF FLAGLER SKIES, INC.



ARTICLE I

Name. The name of the corporation is Flagler Skies, Inc.

ARTICLE II

<u>Principal Office</u>. The principal place of business of the corporation is One Corporate Drive, Suite 3, Palm Coast, Florida 32151-0001.

ARTICLE III

<u>Capital Stock</u>. The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is 100 shares of common stock having a par value of \$1.00 per share, with the consideration to be paid for each share to be in money, property or services, as may be fixed by the Board of Directors.

ARTICLE IV

<u>Term of Existence</u>. This corporation shall have a perpetual existence.

ARTICLE V

Initial Registered Office and Agent. The street address of the initial registered office of this corporation is One Corporate Drive, Suite 3, Palm Coast, Florida 32151-0001, and the name of the initial registered agent of this corporation at that address is William I. Livingston.

ARTICLE VI

Initial Board of Directors. The name and street address of each member of this corporation's first Board of Directors are as follows:

Name

Address

Charles R. Faulkner

One Corporate Drive, Suite 3 Palm Coast, Florida 32151-0001

William I. Livingston

One Corporate Drive, Suite 3 Palm Coast, Florida 32151-0001

ARTICLE VII

<u>Incorporator</u>. The name and street address of the sole incorporator to these Articles of Incorporation is as follows:

Name

Address

Charles R. Faulkner

One Corporate Drive, Suite 3 Palm Coast, Florida 32151-0001

ARTICLE VIII

<u>Indemnification</u>. The Corporation shall indemnify its directors, officers, employees, and agents to the full extent permitted by the Florida Business Corporation Act.

ARTICLE IX

Amendment to Articles. These Articles of Incorporation may be amended in any manner permitted by law.

IN WITNESS WHEREOF, the undersigned does set his hand and seal and has acknowledged and filed the foregoing Articles of Incorporation under the laws of the State of Florida this _28 day of February, 1997.

Masla R. Faultsucer Charles R. Faulkner

STATE OF FLORIDA COUNTY OF FLAGLER

I HEREBY CERTIFY that before me, the undersigned authority, fully authorized to administer oaths and take acknowledgments, personally appeared Charles R. Faulkner, who is personally known by me to be the individual described in and who executed the foregoing Articles of Incorporation, and he acknowledged before me that he executed the same for the purposes therein expressed.

Witness my hand and official seal in the county and state aforesaid mentioned this 28th day of February, 1997.

Elea J. Linehar Public

State of Florida, at Large

My Commission Expires:



<u>CERTIFICATE OF DESIGNATION</u> REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.0505, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1.	The na	me of th	ne con	poration	is	Flagler	Skies,	Inc
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2. The name and address of the registered agent and office is

William I. Livingston One Corporate Drive, Suite 3 Palm Coast, Florida 32151

SIGNATURE:

Charles R. Faulkner

TITLE:

Incorporator

DATE:

February 18, 1997

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, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.0505, FLORIDA STATUTES.

SIGNATURE:

William I. Livingston

DATE:

February 23, 1997