

2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M16000005502

Entity Name: STRATAIR, LLC**Current Principal Place of Business:**1701 NW 66TH AVENUE, SUITE 301
MIAMI, FL 33126**Current Mailing Address:**NORTHERN AVIATION SERVICES ATTN: ANN CAMPBELL
4510 OLD INTERNATIONAL AIRPORT RD.
ANCHORAGE, AK 99502 US**FEI Number:** 81-3115187**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**REGISTERED AGENT SOLUTIONS, INC.
155 OFFICE PLAZA DR.
SUITE A
TALLAHASSEE, FL 32301 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**_____
Electronic Signature of Registered Agent_____
Date**Authorized Person(s) Detail :**

Title	MBR
Name	STRATAIR LTD.
Address	450 ALASKAN WAY SOUTH, SUITE 708
City-State-Zip:	SEATTLE WA 98104

Title	ASSISTANT SECRETARY
Name	GIESE, STEVEN E
Address	450 ALASKAN WAY SOUTH, SUITE 708
City-State-Zip:	SEATTLE WA 98104

Title	VP
Name	GONZALES, ANDRES
Address	1701 NW 66TH AVENUE, SUITE 301
City-State-Zip:	MIAMI FL 33126

Title	PRESIDENT
Name	WENT, TERRENCE
Address	9737 NW 41 STREET, SUITE 258
City-State-Zip:	DORAL FL 33178
Title	SECRETARY
Name	CAMPBELL, AURORA ANN
Address	4510 OLD INTERNATIONAL AIRPORT ROAD
City-State-Zip:	ANCHORAGE FL 99502

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: AURORA ANN CAMPBELL**SECRETARY****04/30/2021**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date