

F 15000000285

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

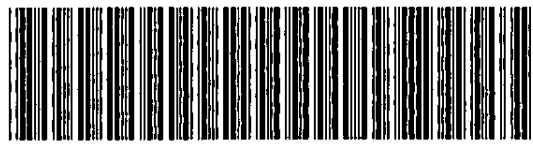
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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15 JAN 20 PM 3:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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AND
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1/21

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Wide Sky Leasing Corp.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Scott C. Burgess

Name of Person

Aviation Legal Group, P.A.

Firm/Company

5525 NW 15th Avenue, Suite 200

Address

Fort Lauderdale, FL 33309

City/State and Zip code

allisons@aviationlegalgroup.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Allison Sass

Name of Person

at (954) 763-5565

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- \$70.00 Filing Fee
- \$78.75 Filing Fee & Certificate of Status
- \$78.75 Filing Fee & Certified Copy
- \$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. Wide Sky Leasing Corp.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Oregon 3. N/A
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 02/05/2009 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. (Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 285 Liberty Street NE, Salem, OR 97301

(Principal office address)

c/o Aviation Legal Group, P.A., 5525 NW 15th Avenue, Ste 200, Fort Lauderdale, FL 33309

(Current mailing address)

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TALLAHASSEE FLORIDA

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8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Aviation Legal Group, P.A.

Office Address: 5525 NW 15th Avenue, Suite 200

Fort Lauderdale, Florida 33309
(City) (Zip code)

9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 obligations of my position as registered agent.

(Registered agent's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

11. Names and business addresses of officers and/or directors:

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Jessica Schwieterman

Address: 803 Clark Avenue, Webster Groves, MO 63119

Director: _____

Address: _____

B. OFFICERS

President: Jessica Schwieterman

Address: 803 Clark Avenue, Webster Groves, MO 63119

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. Jessica Schwieterman

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is 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.

13. Jessica Schwieterman, President

(Typed or printed name and capacity of person signing application)

State of Oregon

OFFICE OF THE SECRETARY OF STATE
Corporation Division

Certificate of Existence 816T342V7

I, Kate Brown, Secretary of State of Oregon, and Custodian of the Seal of said State, do hereby certify:

WIDE SKY LEASING CORP.

is

Incorporated

under the laws of The State of Oregon

and is active on the records of the Corporation Division as of the date of this certificate.

SECRETARY OF STATE
TALLAHASSEE FLORIDA

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APPROVED
AND
FILED

In Testimony Whereof, I have hereunto set my hand and affixed hereto the Seal of the State of Oregon.



A handwritten signature in black ink, appearing to read "Kate Brown".

Kate Brown, Secretary of State

1/8/2015