



State of Rhode Island and Providence Plantations  
**Department of State - Business Services Division**

**Certificate of Authority**  
 FOREIGN Corporation

→ Filing Fee: \$310.00 minimum

Pursuant to the provisions of RIGL 7-1.2-1405, the undersigned foreign corporation hereby applies for a Certificate of Authority to transact business in the State of Rhode Island, and for that purpose submits the following statement:

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 SECRETARY OF STATE  
 CORPORATION DIV  
 2018 JUL 31 PM 4:19

1. The name of the corporation is: <input checked="" type="checkbox"/> AIR PARTNER, INC.		
2. It is incorporated under the laws of: <input checked="" type="checkbox"/> Florida		
3. The name, if different, which it elects to use in Rhode Island is: <input checked="" type="checkbox"/>		
(a) If the name of the corporation in its jurisdiction of incorporation does not contain the word "corporation", "company", "incorporated", or "limited," or an abbreviation thereof, then list the name of the corporation with the addition of one of the above corporate endings for use in Rhode Island: <input checked="" type="checkbox"/>		
(b) If the corporate name is not available in Rhode Island, then set forth below the fictitious name under which the corporation will qualify and transact business in Rhode Island as stated in the "Fictitious Business Name Statement" to be filed with this application: <input checked="" type="checkbox"/>		
4. The date of its incorporation is: <input checked="" type="checkbox"/> 7/8/1997		
And the period of its duration is: <b>CHECK ONLY ONE BOX</b> <input checked="" type="checkbox"/>		
<input checked="" type="checkbox"/> Perpetual (on-going)		
<input type="checkbox"/> Date certain for dissolution _____		
5. The address of its principal office is: <input checked="" type="checkbox"/>		
1100 Lee Wagener Blvd Suite 328, Ft Lauderdale, Florida 33315		
6. The name and address of the initial registered agent/office of in Rhode Island: <input checked="" type="checkbox"/>		
Agent Name Business Filings International, Inc.		
Street Address (NOT a P.O. Box) 450 Veterans Memorial Parkway Suite 7A		
City/Town East Providence	State RHODE ISLAND	Zip Code 02914

**MAIL TO:**  
 Division of Business Services  
 148 W. River Street, Providence, Rhode Island 02904-2615  
 Phone: (401) 222-3040  
 Website: www.sos.ri.gov

**FILED**

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BY 3362031

A.A. 4:19pm.

FORM 100 - Revised 06/2015

7. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:   
 Air charter broker service

8. (a) The names and respective addresses of its directors (optional, unless directors are required under the laws of the state or country of which it is incorporated):

NAME	ADDRESS
Mark Briffa	2 City Place Beehive Ring Road, Gatwick, United Kingdom RH6 0PA

Check the box to indicate an attachment.

8. (b) The names and respective addresses of its principal officers (mandatory if directors are not required under the laws of the state or country of which it is incorporated):

OFFICE	NAME	ADDRESS
PRESIDENT	Mark Briffa	2 City Place Beehive Ring Road, Gatwick, United Kingdom RH6 0PA
VICE PRESIDENT	Mark Briffa	2 City Place Beehive Ring Road, Gatwick, United Kingdom RH6 0PA
TREASURER	Mark Briffa	2 City Place Beehive Ring Road, Gatwick, United Kingdom RH6 0PA
SECRETARY	Mark Briffa	2 City Place Beehive Ring Road, Gatwick, United Kingdom RH6 0PA

Check the box to indicate an attachment.

9. The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

NUMBER OF SHARES	CLASS	SERIES	PAR VALUE OR STATE NO PAR VALUE
10,000	Common		\$0.10

10. (a) Estimate, in dollars, the value of all property to be owned by the corporation for the following year, wherever located   
 \$ 50,000.00

(b) Estimate, in dollars, the value of the corporation's property to be located within Rhode Island during the following year   
 \$ 1,000.00

(c) Estimate, as a percentage, the proportion that the estimated value of the property of the corporation to be located within this state during the following year bears to the value of all property of the corporation to be owned during the following year, wherever located. Note: Divide (10b) by (10a) and multiply by 100 to obtain the percentage.   
 2 %

11. (a) Estimate, in dollars, the gross amount of business to be transacted by the corporation during the following year.  <div style="text-align: center;">\$ <u>55,000,000.00</u></div>	(b) Estimate, in dollars, the gross amount of business to be transacted by the corporation at or from places of business in Rhode Island during the following year.  <div style="text-align: center;">\$ <u>500,000.00</u></div>
(c) Estimate, as a percentage, the proportion of the gross amount of business to be transacted by the corporation at or from places of business in Rhode Island during the following year compared to the gross amount thereof which will be transacted by the corporation during the following year. <i>Note: Divide (11b) by (11a) and multiply by 100 to obtain the percentage.</i>  <div style="text-align: center;"><u>0.9</u> %</div>	
12. This application must be accompanied by a Certificate of Good Standing/Letter of Status issued by the proper officer of the state or country under the laws of which it is incorporated that is dated within 60 days of the filing of this document.	
13. Date when the Certificate of Authority will be effective: <b>CHECK ONLY ONE BOX</b>	
<input checked="" type="checkbox"/> Date received (Upon filing)	
<input type="checkbox"/> Later effective date (Date must be no more than 90 days from the day of filing) _____	
<i>Under penalty of perjury, I declare and affirm that I have examined this Application for Certificate of Authority, including any accompanying attachments, and that all statements contained herein are true and correct.</i>	
Type or Print Name of Authorized Officer Mark Briffa, President	Date <div style="text-align: center; font-size: 1.2em;">7-30-18</div>
Signature of Authorized Officer of the Corporation	

If you have any questions, please call us at (401) 222-3040, Monday through Friday, between 8:30 a.m. and 4:30 p.m., or email [corporations@sos.ri.gov](mailto:corporations@sos.ri.gov).

# *State of Florida*

## *Department of State*

I certify from the records of this office that AIR PARTNER, INC. is a corporation organized under the laws of the State of Florida, filed on July 8, 1997.

The document number of this corporation is P97000059301.

I further certify that said corporation has paid all fees due this office through December 31, 2018, that its most recent annual report/uniform business report was filed on July 19, 2018, and that its status is active.

I further certify that said corporation has not filed Articles of Dissolution.

*Given under my hand and the  
Great Seal of the State of Florida  
at Tallahassee, the Capital, this  
the Thirtieth day of July, 2018*



*Ken Detjmer*  
**Secretary of State**

Tracking Number: CU7379952002

To authenticate this certificate, visit the following site, enter this number, and then follow the instructions displayed.

<https://services.sunbiz.org/Filings/CertificateOfStatus/CertificateAuthentication>



State of Rhode Island and Providence Plantations  
**Department of State | Office of the Secretary of State**  
**Nellie M. Gorbea**, *Secretary of State*

I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island  
and Providence Plantations, hereby certify that this document, duly executed in  
accordance with the provisions of Title 7 of the General Laws of Rhode Island, as  
amended, has been filed in this office on this day:

July 31, 2018 04:19 PM

A handwritten signature in blue ink, appearing to read "Nellie M. Gorbea". The signature is fluid and cursive, written in a professional style.

Nellie M. Gorbea  
*Secretary of State*

