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PERSON OF CORPORATION

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COVER LETTER

TO: New Filing Section Division of Corporations				
SUBJECT: Helicopters, Inc.				
(Name of corporation - must include suffix)				
Dear Sir or Madam:				
The enclosed "Application by Foreign Corporation for Authoric "Certificate of Existence," and check are submitted to register transact business in Florida.				
Please return all correspondence concerning this matter to the f	following:			
Stephen C. Lieber				
(Name of Person)				
Helicopters, Inc.				
(Firm/Company)				
5000 Omega Dr.				
(Address)				
Cahokia, IL 62206				
(City/State and Zip	code)			
For further information concerning this matter, please call:				
Stephen C. Lieber at (618) 337-2903				
(Name of Person) (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 F.O. Box 6327 Tallahassee, FL 32314			
Enclosed is a check for the following amount:				
	Filing Fee & \$87.50 Filing Fee, ied Copy 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.	Helicopters, Inc.			
	(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"			-
	"Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")			
	Helicopters, Inc.			_
	(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting bus	iness in F	lorida)	
_	Minnouni			
	. <u>Missouri</u> 3. <u>431252563</u>			-
	(State or country under the law of which it is incorporated) (FEI number, if applicable	e)		
4.				
	(Date of incorporation) (Duration: Year corp. will cease to exist	or "perp	etual")	-
	7.405.406			
6.				_
	(Date first transacted business in Florida, if prior to registration)	-1	20	
	. (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)	Ē	8	
7.	5000 Omega Dr	≥ ₹	איר 3005	
(Principal office address)				
·			9	-
	Cahokia, IL 62206	m	17-	<u> </u>
(Current mailing address)			 	
		်ဝ္က ႏ	••	
R	Real Estate Development	85	8	
٥.	(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)	- 3		-
	(2 aspectation of the second section of the second of the			
9.	Name and street address of Florida registered agent: (P.O. Box NOT acceptable)			
	Name: Stephen C. Lieber			
Oí	ffice Address: 1170 Gulp Blvd. 2201			
	Clearwater , Florida 33767			
	(City) (Zip code)			

10. 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)

11. 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.

12. Names and business addresses of officers and/or directors: FILED A. DIRECTORS 2006 JUL 26 AMII: 18 Chairman: Stephen C. Lieber Ulymon or som orallohs Address: 5000 Omega Dr TALLAHASSEE, FLORIDA Cahokia, IL 62206 Vice Chairman: N/A Address: Director: N/A Director: N/A **B. OFFICERS** President: Stephen C. Lieber Address: 5000 Omega Dr. Cahokia, IL 62206 Vice President: N/A Secretary: Cindy Hesse Address: 5000 Omega Dr Cahokia, IL 62206 Treasurer: N/A Address: NOTE: If necessary, you and attach an addendum to the application listing additional officers and/or directors. (Signature of Director or Officer listed in number 12 of the application)

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

14. Stephen C. Lieber, President

STATE OF MISSOURI



Robin Carnahan Secretary of State

CORPORATION DIVISION
CERTIFICATE OF GOOD STANDING

I, ROBIN CARNAHAN, Secretary of the State of Missouri, do hereby certify that the records in my office and in my care and custody reveal that

HELICOPTERS, INC. 00236250

was created under the laws of this State on the 13th day of November, 1981, and is in good standing, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I have set my hand and imprinted the GREAT SEAL of the State of Missouri, on this, the 25th day of July, 2006

Alm Comehan Secretary of State

Certification Number: 8907111-1 Reference

