

F17000003654

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

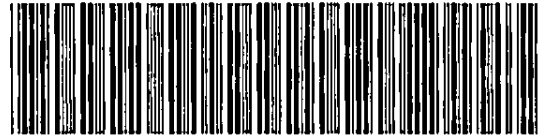
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

W17-64525

Office Use Only



500302000545

09/03/17--01022--004 \*\*97.50

FILED  
17 AUG 14 AM 11:49  
TALLAHASSEE, FLORIDA

AUG 15 2017

Y SULKER



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 7, 2017

SARAH BOYD  
6315 CHANCELLOR DR  
CEDAR FALLS, IA 50613 US

SUBJECT: AERIAL SERVICES, INC.  
Ref. Number: W17000064525

We have received your document for AERIAL SERVICES, INC. and your check(s) totaling \$87.50. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yasemin Y Sulker  
Regulatory Specialist II

Letter Number: 517A00016021

## COVER LETTER

**TO:** Registration Section  
Division of Corporations  
Aerial Services, Inc

**SUBJECT:** \_\_\_\_\_  
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:  
Sarah Boyd

\_\_\_\_\_  
Name of Person  
Aerial Services, Inc

\_\_\_\_\_  
Firm/Company  
6315 Chancellor Dr

\_\_\_\_\_  
Address  
Cedar Falls, IA 50613

\_\_\_\_\_  
City/State and Zip code  
sboyd@aerialservicesinc.com

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

For further information concerning this matter, please call:

Sarah Boyd                      319              277-0436  
\_\_\_\_\_  
Name of Person              Area Code              Daytime Telephone Number

**STREET/COURIER ADDRESS:**

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

**MAILING ADDRESS:**

Registration 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.*

Aerial Services, Inc

1. \_\_\_\_\_  
(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)

Iowa 42-0939530

2. \_\_\_\_\_ 3. \_\_\_\_\_  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

June 1967 Perpetual

4. \_\_\_\_\_ 5. \_\_\_\_\_  
(Date of incorporation) (Date of duration, if other than perpetual)

Upon Qualification

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

6315 Chancellor Dr. Cedar Falls, IA 50613

7. \_\_\_\_\_  
(Principal office address)

Same

\_\_\_\_\_  
(Current mailing address, if different)

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

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee Florida 32301  
(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.*

Jennifer Z Hiesten  
(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.

17 AUG 14 AM 11:49  
TALLAHASSEE, FLORIDA

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

**A. DIRECTORS**

Chairman: Michael P. Tully  
487 Progress Ave  
Address: Waterloo, IA 50701

Vice Chairman: Kirk P. Fisher  
33028 310th St  
Address: New Hartford, IA 50660

Director: Walter E. Ertz  
2601 Victory Dr  
Address: Cedar Falls, IA 50613

Director: \_\_\_\_\_  
Address: \_\_\_\_\_

**B. OFFICERS**

President: Michael P. Tully  
487 Progress Ave  
Address: Waterloo, IA 50701

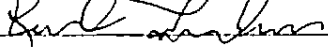
Vice President: Kirk P. Fisher  
33028 310th St  
Address: New Hartford, IA 50660

Secretary: Walter E. Ertz  
2601 Victory Dr, Cedar Falls, IA 5061  
Address: \_\_\_\_\_

Treasurer: Kirk P. Fisher  
33028 310th St, New Hartford, IA 50660  
Address: \_\_\_\_\_

17 AUG 14 AM 11:49  
DEPT OF STATE  
FLORIDA

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

12.   
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 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.

Kirk P. Fisher  
13. \_\_\_\_\_  
(Typed or printed name and capacity of person signing application)

8/10/2017

Certificate of Standing

**IOWA SECRETARY OF STATE  
PAUL D. PATE**



**CERTIFICATE OF EXISTENCE**

**Certificate Validation**

The following certificate was issued by the Iowa Secretary of State  
Certificate ID: **CS138562** Validation Date: **8/10/2017**

Date: 8/10/2017

Name: AERIAL SERVICES, INC. (490 DP - 1398)

Date of Incorporation: 6/5/1967

Duration: PERPETUAL

I, Paul D. Pate, Secretary of State of the State of Iowa, custodian of the records of incorporations, certify the following for the corporation named on this certificate:

- a. The entity is in existence and duly incorporated under the laws of Iowa.
- b. All fees required under the Iowa Business Corporation Act due the Secretary of State have been paid.
- c. The most recent biennial report required has been filed with the Secretary of State.
- d. Articles of dissolution have not been filed.

A handwritten signature in black ink, reading "Paul D. Pate".

Paul D. Pate, Iowa Secretary of State