FILED

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1 of 2

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

06 OCT 20 PM 12:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95000002420

1. Corporation Name
Keystone Helicopter Corporation

REINSTATEMENT 05-06

2. Principal Office Address		3. Mailing Office Address	
110 E.Stewart Huston Dr		110 E. Stewart Huston Dr.	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Coatesville, PA		Coatesville, PA	
Zip	Country	Zip	Country
19320	USA	19320	USA

CR2E081 (12/05)

4. Date Incorporated or Qualified To Do Business in Florida: 1953

5. FEI Number: 23-1596550 ☐ Applied For ☒ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $30.00 Additional for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: CT Corporation System

Street Address (P.O. Box Number is Not Acceptable): 1200 South Pine Island Road

Suite, Apt. #, Etc.:

City: Plantation | State: FL | Zip Code: 33324

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent: Margaret E Rawlins — REGISTERED AGENT MUST SIGN — Date: 10/19/06

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	David A. Ford	110 East Stewart-Huston Drive	Coatesville, PA 19320
V	Rick Hinkle	(same)	(same)
V	Ralph Kunz	(same)	(same)
S	Patty Ryan	(same)	(same)

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid, and the names of individuals listed on this form do not qualify for an exemption contained in Chapter 119, F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: [signature] Rick Hinkle Vice President — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date: 10-18-06 — Daytime Phone #: 610 883 4475

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Florida Department of State
Division of Corporations
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CORPORATION REINSTATEMENT

KEYSTONE HELICOPTER CORPORATION

Certificate of Status	0
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