

F990000004031

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section  
Division of Corporations

SUBJECT: AEROUTFITTERS, INC.

(Name of corporation - must include suffix)

400002949844--7

-08/04/99-01013--007

\*\*\*\*\*70.00 \*\*\*\*\*70.00

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", 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:

HORACE WHITELEY

(Name of Person)

AEROUTFITTERS, INC.

(Firm/Company)

4609 WEST CHESTER PIKE

(Address)

NEWTOWN SQUARE PA 19073-2211

(City/State/Zip)

Should you need to call someone concerning this matter, please call:

TAMI FIRTH

(Name of Person)

at 610-325-7100

(Area Code & Daytime Telephone Number)

**STREET ADDRESS:**

Qualification/Tax Lien Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

**MAILING ADDRESS:**

Qualification/Tax Lien Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

99 AUG-4 AM 10:17

SECRET  
DIVISION OF CORPORATIONS  
FILED

mtm  
8/6

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

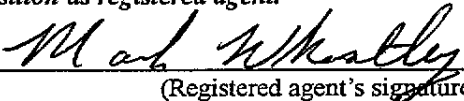
☐ \$87.50 Filing Fee,  
Certificate of Status &  
Certified Copy

**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. AEROUTFITTERS, INC.  
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. PENNSYLVANIA  
(State or country under the law of which it is incorporated)
3. 23-2788649  
(FEI number, if applicable)
4. 11/18/94  
(Date of incorporation)
5. PERPETUAL  
(Duration: Year corp. will cease to exist or "perpetual")
6. APRIL 26, 1999  
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 4609 WEST CHESTER PIKE  
NEWTOWN SQUARE PA 19073-2211  
(Current mailing address)
8. DISTRIBUTION OF TURBINE ENGINE PARTS  
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box **NOT** acceptable)  
Name: MARK WHEATLEY  
Office Address: 12704 NW 20TH STREET  
PEMBROKE PINES, Florida, 33028  
(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 addresses of officers and/or directors: (Street address **ONLY** - P.O. Box **NOT** acceptable)

**A. DIRECTORS (Street address only - P.O. Box NOT acceptable)**

Chairman: \_\_\_\_\_

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

Vice Chairman: \_\_\_\_\_

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

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

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

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

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

**B. OFFICERS (Street address only - P.O. Box NOT acceptable)**

President: HORACE W. WHITELEY

Address: 4609 WEST CHESTER PIKE

NEWTOWN SQUARE PA 19073-2211

Vice President: JOHN P. JANIAC

Address: 4609 WEST CHESTER PIKE

NEWTOWN SQUARE PA 19073-2211

Secretary: \_\_\_\_\_

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

Treasurer: TAMI L. FIRTH

Address: 4609 WEST CHESTER PIKE

NEWTOWN SQUARE PA 19073-2211

FILED  
99 AUG - 1 AM 10:17  
CLERK OF SUPERIOR COURT  
COUNTY OF ST. LOUIS

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

13. *H. Whiteley*

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. H.W. Whiteley president

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

COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF STATE

JULY 20, 1999

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

AEROUTFITTERS INC.

is duly incorporated under the laws of the Commonwealth of Pennsylvania  
and remains a subsisting corporation so far as the records of this office  
show, as of the date herein.



IN TESTIMONY WHEREOF, I have  
hereunto set my hand and caused  
the Seal of the Secretary's  
Office to be affixed, the day  
and year above written.

*Kim Ditzinger*

Secretary of the Commonwealth

JSOW

99 AUG -4 AM 10:17

FILED  
STATE  
DIVISION