

P94000058284

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

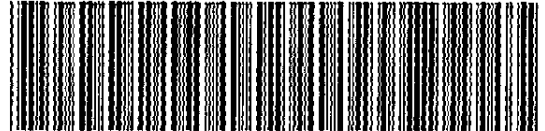
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TALLAHASSEE, FLORIDA

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January 16, 2006

VIA FEDERAL EXPRESS

Florida Department of State
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

Re: Change of Registered Agent

Dear Sir or Madam:

Enclosed please find one original and one copy of registered agent change forms for the entities listed below. Please file the originals and return the file-stamped copies in the enclosed self-addressed, stamped envelope. Also, enclosed is a check in the amount of \$105.00 to cover the total filing fee.

Corporation:

White Rose Aviation, Inc.
York Aviation GP, Inc.

Limited Partnerships:

York Aviation Limited Partnership

Thank you in advance for your prompt attention to this matter. Should you have any questions or require additional information please do not hesitate to contact me directly.

Sincerely,

Allan D. Sowash
Legal Assistant

Enclosures

cc: -- James A. Rutledge, Esq.

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: York Aviation GP, Inc.
(Name of Corporation)

DOCUMENT NUMBER: P94000058284

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

James A. Rutledge, Esq.
(Name of Contact Person)

Bricker & Eckler LLP
(Firm/Company)

100 South Third Street
(Address)

Columbus, Ohio 43215
(City/State and Zip Code)

For further information concerning this matter, please call:

Allan Sowash at (614) 227-8817
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: York Aviation GP, Inc.
2. The principal office address: c/o James A. Rutledge, 100 South Third Street, Columbus, Ohio 43215
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 08/08/1994 Document number: P94000058284

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Kriner, Deborah L.

1201 US Highway One, Suite 350A

North Palm Beach, FL 33408

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Eric Lee

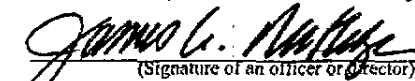
5550 Glades Road, Suite 401

(P.O. Box NOT acceptable)

Boca Raton, FL 33431

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


(Signature of an officer or director)

James A. Rutledge, President
(Printed or typed name and title)

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.


(Signature of Registered Agent)

1/10/06
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (8/05)

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