PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
03 OCT 27 PM 2:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000063128

1. Corporation Name
Aircash, Inc

REINSTATEMENT 03

2. Principal Office Address	3. Mailing Office Address
6415 Lake Worth Rd	Same
Suite, Apt. #, etc.: Suite 203	Suite, Apt. #, etc.
City & State: Lake Worth FL 33463	City & State
Zip: 33463 Country: USA	Zip Country

4. Date Incorporated or Qualified To Do Business in Florida: 1997

5. FEI Number: 65-0772838 — Applied For — Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ Note: Additional fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: Dean S Keil

Street Address (P.O. Box Number is Not Acceptable): 6415 Lake Worth Road

300024164253
10/27/03--01047--009 **150.00

Suite, Apt. #, Etc.: Suite 203

City: Lake Worth State: FL Zip Code: 33463

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: Dean S Keil Date: 10-22-2003

REGISTERED AGENT MUST SIGN

CR2E081 (10/02)

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	Keil, Dawn	6415 Lake Worth Rd Ste 203	Lake Worth FL 33463

$61.25

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 under section 119.07(3)(i), 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.

561-969-3870

SIGNATURE: Dean S Keil 10-22-2003

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

AirCash, Inc.
6415 Lake Worth Road, Suite 203
Lake Worth, Fl 33463

October 22,2003

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Fl 32314

Re: P97000063128

Please be advised that as of 9-18-03 are status was changed to inactive.
In 2002 we submitted an Articles of Mendment, Articles of Incorporation
for a name and address change of Complete Control Technologies, Inc.
to AirCash, Inc. (see attached copy) the address was never updated an
we never received or 2003 Uniform Business Report to file and keep our
status current, it evidently went to the old address and we never received it.
You updated the registered agent address but not the mailing address.
We would like to have the late filling fee waived and all information updated
Thank you for your consideration in this matter.

Donna Keil
President