

STANDARD AIRWORTHINESS CERTIFICATE

NOTED:

EXPIRES 23.991(8)(1)

EA-F580-39

U.S. 249 2001 2004

NAME OF APPLICANT: **PAIKS, STEPHEN L**

TYPE OF APPLICATION:  1. Renewal  2. First-time  3. Conversion  4. Extension  5. Other

TELEPHONE NUMBER: [REDACTED]

ADDRESS: [REDACTED]

CITY: **Scottsdale** STATE: **ARIZONA** ZIP CODE: **85260**

**CHECK HERE IF YOU ARE ONLY REPORTING A CHANGE OF ADDRESS ATTENTION!**  
This portion MUST be completed

**CERTIFICATION**

I, the undersigned, hereby certify that the information furnished on this application is true and correct to the best of my knowledge and belief, and that I am a duly licensed and qualified pilot as required by the Federal Aviation Regulations.

NOTE: If provided by accompanying an applicant must sign. Use reverse side if necessary.

| TYPE OR PRINT NAME BELOW SIGNATURE | TITLE | DATE     |
|------------------------------------|-------|----------|
| [REDACTED]                         |       | 11/10/12 |
| [REDACTED]                         |       |          |
| [REDACTED]                         |       |          |

FAA Form 8130-2 (Rev. 10-2009)