

STATE OF FLORIDA DEPARTMENT OF HEALTH BUREAU OF EMERGENCY MEDICAL OVERSIGHT

AIR AMBULANCE SERVICE LICENSE

| This is to certify the | at: AIR AMBULANCE WORLDWIDE, LLC Name of Provider | Provider Number #:5231_ |
|--|--|-------------------------|
| | Name of Flovider | |
| 4311 GENERAL HOWARD DRIVE, CLEARWATER, FLORIDA 33762 | | |
| Address | | |
| has complied with Chapter 401, Florida Statutes, and Chapter 64J-1, Florida Administrative Code, and is authorized to operate as an Air Ambulance Service subject to any and all limitations specified in the applicable Certificate(s) of Public Convenience and Necessity and/or Mutual Aid Agreements for the County(s) listed below: | | |
| | N/A | |
| | County(s) | |

Michael Hall, Section Administrator Emergency Medical Services Florida Department of Health

THIS CERTIFICATE EXPIRES ON: 04/26/2026

This certificate shall be posted in the above mentioned establishment