

United States Of America
Department of Transportation - Federal Aviation Administration
Supplemental Type Certificate

Number SA2876WE

This Certificate issued to DeVore Aviation Corporation of America,
a New Mexico Corporation
6104-B Jefferson, N.E.
Albuquerque, NM 87109-3410

certifies that the change in the type design for the following product with the limitations and conditions therefor as specified hereon meets the airworthiness requirements of Part 25 of the Federal Aviation Regulations.

Original Product Type Certificate Number : A10CE

Make : Gates Learjet

Model : 24, 24A, 24B, 24B-A, 24C, 24D, 24D-A, 24E,
24F, 24F-A, 25, 25A, 25B, 25C, 25D, 25F,
35, 35A, 36, 36A, 55, 55B

Description of Type Design Change:

Installation of vertical tail floodlights on the horizontal stabilizer in accordance with DeVore Aviation Drawing 02300001, Revision J-2 dated 10/31/84, or later FAA approved revision.

Limitations and Conditions:

Compatibility of this modification with other previously approved modifications must be determined by the installer.

This certificate and the supporting data which is the basis for approval shall remain in effect until surrendered, suspended, revoked or a termination date is otherwise established by the Administrator of the Federal Aviation Administration.

Date of application : January 08, 1974

Date reissued : January 31, 2000

Date of issuance : May 01, 1974

Date amended : 11/30/77; 6/1/78;
12/3/84; 4/16/87 Rev. 4



By direction of the Administrator

Michele M. Owsley
(Signature)

Michele M. Owsley, Manager
Airplane Certification Office,
Southwest Region

(Title)

Any alteration of this certificate is punishable by a fine of not exceeding \$1,000, or imprisonment not exceeding 3 years, or both.

INSTRUCTIONS: The transfer endorsement below may be used to notify the appropriate FAA Regional Office of the transfer of the Supplemental Type Certificate.

The FAA will reissue the certificate in the name of the transferee and forward it to him.

TRANSFER ENDORSEMENT

Transfer the ownership of Supplemental Type Certificate Number _____

to (Name of transferee) _____

(Address of transferee) _____

(Number and street)

(City, State, and ZIP code)

from (Name of grantor) (Print or type) _____

(Address of grantor) _____

(Number & street)

(City, State, and ZIP code)

Extent of Authority (if licensing agreement): _____

Date of Transfer: _____

Signature of grantor (In ink): _____