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(((H09000133028 3)))



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Division of Corporations

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From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255 Phone : (305)634-3694 Fax Number : (305)633-9696

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

WHOLE WHEAT AVIATION, LLC

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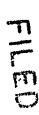
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June 2, 2009

FLORIDA DEPARTMENT OF STATE Division of Corporations

WHOLE WHEAT AVIATION, LLC 2771 EXECUTIVE PARK DRIVE, SUITE 3 WESTON, FL 33331

SUBJECT: WHOLE WEEAT AVIATION, LLC

REF: L09000050170

We received your electronically transmitted document. However, the modern document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover the electronic

You must insert the letters "MGRM" in the block above the name and address of each managing member and/or the letters "MGR" in the block above the name and address of each manager listed.

Please mark the box for add or remove.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline Regulatory Specialist II FAX Aud. #: H09000133028 Letter Number: 409A00018413

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SECREMAN LE STATE
TALLAHASSEE, FLORIDA

P.O BOX 6327 - Tallahassee, Flonda 32314

H090001330028

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

WHOLE W	<u>HEAT AVIATION, I</u>	LLC	
(Name of the Limited Liability (A Florida	v Company as it now appea Limited Liability Company)	rs on our records.)	- -
The Articles of Organization for this Limited Liability of Florida document number <u>L09000050170</u>	Company were filed on	May 21, 2009	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lim	ulted liability company he	re:	
		 -	790 7A1
The new name must be distinguishable and end with the wo	rds "Limited Liability Compa	any," the designation '	
Enter new principal offices address, if applicable:			SS AR
(Principal office address MUST BE A STREET ADD)	RESS)		mo B
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			STATE ATTENDED
B. If amending the registered agent and/or registered agent and/or the new registered office add Name of New Registered Agent: New Registered Office Address:		our records, enter	the name of the new
	En	ter Florida street ad	dress
	. Florida		
	Clty		Zip Code
New Registered Agent's Signature, if changing Registere	d Agent		-

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 fumiliar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Ragistered Agent

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If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGRM = Managing Member Title Name Address Type of Action MGRM Zalman Lakach 137 Golden Beach Drive Golden Beach, El. 33160 Add Remove DbA 🔲 🔲 Remove ☐ Add 🔲 Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary,) May 29 Dated_ Signature of a member or authorized representative of a member Keith D. Diamond Typed or printed name of signce Page 2 of 2

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MGR = Manager