

**2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

**FILED  
Oct 28, 2008  
Secretary of State**

DOCUMENT# M06000004035

Entity Name: AAC/MSN 24555, L.L.C.

**Current Principal Place of Business:**

848 BRICKELL AVENUE, SUITE 900  
MIAMI, FL 33131

**New Principal Place of Business:**

848 BRICKELL AVENUE  
SUITE 500  
MIAMI, FL 33131

**Current Mailing Address:**

848 BRICKELL AVENUE, SUITE 900  
MIAMI, FL 33131

**New Mailing Address:**

848 BRICKELL AVENUE  
SUITE 500  
MIAMI, FL 33131

FEI Number: 42-1630552

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

KORN, ROBERT G  
848 BRICKELL AVENUE, SUITE 900  
MIAMI, FL 33131 US

**Name and Address of New Registered Agent:**

FIGUERAS, HECTOR  
848 BRICKELL AVENUE  
SUITE 500  
MIAMI, FL 33131 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: HECTOR FIGUERAS

10/28/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: APOLLO AVIATION CAPI, TAL  
Address: 848 BRICKELL AVENUE, SUITE 900  
City-St-Zip: MIAMI, FL 33131

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: APOLLO AVIATION CAPI, TAL, L.L.C.  
Address: 848 BRICKELL AVENUE, SUITE 500  
City-St-Zip: MIAMI, FL 33131

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ROBERT G. KORN

MR.

10/28/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date