2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# M05000000616

Entity Name: APOLLO AVIATION CAPITAL MANAGEMENT, LLC

FILED Oct 29, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

848 BRICKELL AVE STE 900 848 BRICKELL AVENUE MIAMI, FL 33131

SUITE 500 MIAMI, FL 33131

Current Mailing Address: New Mailing Address:

848 BRICKELL AVE STE 900 848 BRICKELL AVENUE

MIAMI, FL 33131 SUITE 500 MIAMI, FL 33131

FEI Number: 20-0701388 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

FIGUERAS, HECTOR FIGUERAS, HECTOR 848 BRICKELL AVE STE 900 848 BRICKÉLL AVENUE MIAMI, FL 33131 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: 10/29/2008

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

() Delete Title: (X) Change () Addition

KORN, ROBERT KORN, ROBERT Name: Name: Address: 848 BRICKELL AVE STE 900 Address: 848 BRICKELL AVE STE 500

City-St-Zip: MIAMI, FL 33131 City-St-Zip: MIAMI, FL 33131

Title: MGR () Delete Title: MGR (X) Change () Addition Name: HOFFMAN, WILLIAM Name: HOFFMAN, WILLIAM

Address: 848 BRICKELL AVE STE 900 Address: 848 BRICKELL AVE STE 500

City-St-Zip: MIAMI, FL 33131 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 10/29/2008