1070000 56637

(Req	uestor's Name)		
(Add	ress)			
(Add	ress)			
(City)	/State/Zip/Phor	ne #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Doc	ument Number)		
Certified Copies	Certificate	es of Status		
Special Instructions to Fi	iling Officer:			
		·		

Office Use Only



000130662040

06/16/08--01018--012 **25.00

SECRETARY OF STATE
SECRETARY OF STATE

.

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: GLOBAL JET PILOT TRAINING ACADEMY LLC (Name of Limited Liability Company)	
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
STAN BODNER (Name of Person)	08
GLABOR JET PILOT TRAINING ALADEMY (Firm/Company)	08 JUH 16 PH 12: 16
Po Box 660466 (Address)	OF R
(Address)	難る
MI AMI, FZ 332.66 (City/State and Zip Code)	D
For further information concerning this matter, please call:	
(Name of Person) at (305) 874-7070 (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:	
\$25.00 Filing Fee Certificate of Status Certificate of Status & Certificate of S	d)

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

`		1 -37		
The Articles of Organization for this Limited Liab	lity Company were filed	on <u>5/30/2007</u>	and assigned	
Florida document number L 070 000 56		•		
Tiorida document number	<u> </u>			
			8	
This amendment is submitted to amend the following	ing:		FUL U	
	****		FG & Th	•
A. If amending name, enter the new name of th	e limited liability compa	any here:	型 三 自	
			SECULIARISM SECULIARISM FILED	
GLOBAL ENERGY MANAGE	ember systems	LLC		
The new name must be distinguishable and end with the "L.L.C."	ne words "Limited Liability	Company," the designation "	'LLC" or the abbreviation	
L.L.C,			ST :	
Enter new principal offices address, if applicabl	i o •		台部の	
• • •				
(Principal office address MUST BE A STREET	(DDRESS)		<u> </u>	
				
Enter new mailing address, if applicable:	H-1	······································		
(Mailing address MAY BE A POST OFFICE BO	(X)			
B. If amending the registered agent and/or	registered office addres	ss on our records, <u>enter</u>	the name of the new	
registered agent and/or the new registered office	address here:			
	Com 1 Day	· · · · · · · · · · · · · · · · · · ·		
Name of New Registered Agent:		DNER		
No Posta 100 A 11		GRICAN DRIVE		<u>~~</u>
New Registered Office Address:	20110 GIT, 12			Loca
		(Enter Florida street ad	iaress)	
	MIAMI	, Florida	33133	
-	(City)	, Fivi dia	(Zip Code)	
	, , ,		(Lip Code)	
New Registered Agent's Signature, if changing Regi	stered 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 familiar 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.

Page 1 of 2

(If Changing Registered Agent, Senature of New Registered Agent)

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:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	LORGNTZ, RENATA	4900 NW 36 ST. SOITE 101 MI AMI, 12 33166 US	AddRemove
<u>P</u>	Mongenet, Johas	4900 NW 3657 SUNF 101 MIAMI, F. 33166 US	Add Remove
P	SHOW BODNER STAN	3400 PANAMERICAN DRIVE MIAMI, FL 33133 US	Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amen	ding any other information, enter change	e(s) here: (Attach additional sheets, if necessary.)	1
			GB JUN 16 PH 12: 16 SECRETARY OF STATE FALLAHASSEE, FLOAID
Dated	June 11 , 200		Du o
	Scholar Signature of a priember	or authorized representative of a member	
		or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00