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C. LEWIS JUN 29 2012 **EXAMINER**



CORPORATION SERVICE COMPANY

TON SERVICE COMPANY			
ACCOUNT NO. : 12000000195			
REFERENCE : 255403 7736440			
AUTHORIZATION :			
COST LIMIT : \$ 25.00			
ORDER DATE : June 26, 2012			
ORDER TIME : 1:45 PM			
ORDER NO. : 255473-024			
CUSTOMER NO: 7736440			
CHANGE OF AGENT			
NAME: APOLLO AVIATION HOLDINGS U.S., LLC			
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:			
CERTIFIED COPY XX PLAIN STAMPED COPY			
CONTACT PERSON: Becky Peirce EXT# 2919			
EXAMINER:			

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: APOLLO AVI	ATION HOLDINGS U.S., LLC
2. (a) Principal office address of limited liability company (<i>Note: MUST BE STREET ADDRESS</i>)	2: 848 Brickell Avenue, Suite 500, Miami FL 33131
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	848 Brickell Avenue, Suite 500, Miami FL 33131
06/04/2007	L07000058479
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:
Registered Agent:	CT Corporation System 1200 S. Pine Island Road
Registered Office Address:	1200 S. Pine Island Road Plantation FL 33324
(b) Enter name of NEW Registered Agent and/or NEW	W Registered Office address:
NEW Registered Agent:	Corporation Service Company
NEW Registered Office Address:	1201 Hays Street
(MUST BE FLORIDA STREET ADDRESS)	Tallahassee ,FL 32301
If the limited liability company is not organized under the limited that after the change or changes are made, the Florida stree office of the registered agent will be identical. Or, in the canereby confirmed that the change(s) was/were authorized be iability company or as otherwise provided in the articles of imited liability company. Maure Cathely	t address of the registered office and the business ase of a Florida limited liability company, it is
Signature of a member or authorized representative of a member)	_
Maureen Cathell, Authorized Person (Printed or typed name of signee)	<u>.</u>
I hereby accept the appointment as registered agent and a comply with the provisions of all statules relative to the pro am familiar with and accept the obligations of my position F.S. Or, if this document is being filed to merely reflect a c confirm that the limited liability company has been notified	gree to act in this capacity. I further agree to oper and complete performance of my duties, and I as registered agent as provided for in Chapter 608, change in the registered office address, I hereby I in writing of this change.
BV: SAIAL IDIAME	· · · · · · · · · · · · · · · · · · ·
(Signature of Registered Agent) Corporation Service Company	Sarah Wright, Asst. Vice President

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00