

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000034418

Entity Name: ATRIUM AVIATION, LLC

FILED
Feb 06, 2009
Secretary of State

Current Principal Place of Business:

870 SOUTH OCEAN BOULEVARD
PALM BEACH, FL 33480

New Principal Place of Business:

Current Mailing Address:

870 SOUTH OCEAN BOULEVARD
PALM BEACH, FL 33480

New Mailing Address:

1120 ALPS ROAD
WAYNE, NJ 07470

FEI Number: 26-3362283

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZOIS, ELIA
870 SOUTH OCEAN BOULEVARD
PALM BEACH, FL 33480 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ZOIS, ELIA
Address: 870 SOUTH OCEAN BOULEVARD
City-St-Zip: PALM BEACH, FL 33480

Title: MGRM () Delete
Name: TUFARIELLO, VINCENT
Address: 1120 ALPS ROAD
City-St-Zip: WAYNE, NJ 07470

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: VINCENT TUFARIELLO

MGRM

02/06/2009

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