L08000093340

· (Requestor's Name)				
(Address)				
(Address)				
(Cib. (Chaha / Zin (Chana 46)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				





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SECRETIGNY DE STATE
DIVISION DE COMPORATIONS

T. HAMPTON

JAN 1 2 2010

EXAMINER

COVER LETTER

TO:	Registration S Division of Co						
.SUBJE	CT:	Sidecoach Sin	nulation Training LLC				
		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ted Liability Company				
The end	closed Articles of	Amendment and fee(s) are sub	omitted for filing.				
Please	return all corresp	ondence concerning this matter	to the following:				
	Jeffery M. Wirth Name of Person						
		•					
Sidecoact			ach Simulation Training LL	<u>C</u>			
	155 S. Court Ave, Unit 2414						
	Address						
			Orlando, FL 32801				
			City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·			
	jeff@sidecoach.com E-mail address: (to be used for future annual report notification)						
For fur	ther information	e-man address: (•	neation)			
		Jeff Wirth	at (321)	251-8864			
	Name	of Person	Area Code & Daytin	ne Telephone Number			
Enclose	ed is a check for	the following amount:					
\$25	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55,00 Filing Fee & Certified Copy (additional copy is enclosed	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		ration Section on of Corporations Box 6327	STREET/COUR Registration Section Division of Corpor Clifton Building 2661 Executive Corporation Tallahassee, FL 3	on orations enter Circle			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Sidecoach	Simulation Training	LLC		
(Name of the Limited Liabili (A Florida	a Limited Liability Company)	rs on our records.)		
The Articles of Organization for this Limited Liability Florida document number L08000093340	Company were filed on	Oct. 1, 2008	and assigr	ied
			•	
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the lin	mited liability company he	<u>re</u> ;		
The new name must be distinguishable and end with the w "L.L.C."	ords "Limited Liability Comp.	any," the designation "L	LC" or the abb	reviation
Enter new principal offices address, if applicable:				y ZNE
(Principal office address MUST BE A STREET ADL	ORESS)		<u>ل</u> <u>لم</u>	200 200 300 300 300 300 300 300 300 300
			<u> </u>	المودي
Enter new mailing address, if applicable:			PH	
(Mailing address MAY BE A POST OFFICE BOX)			;:	N.S.
			<u>සා</u>	
B. If amending the registered agent and/or reg		our records, <u>enter tl</u>	ne name of 1	the new
Name of New Registered Agent:				
New Registered Office Address:				
	Er	nter Florida street addr	ess	
	City	, Florida	Zip Code	

New Registered Agent's Signature, if changing Registered 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.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Kenneth Ingraham	8111 Sparrow Dr. Orlando, Fl. 32825	_ ✓ Add _ Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amendi	ing any other information, e	enter change(s) here: (Attach additional sheets, if necessary.)	<u> </u>
			SECRETARY OF COMMENTS
			PH 2: 03
Dated	January 8		_)
	Signatura	of a member authorized representative of a member	
	ыдпашо	Jeffery M. Wirth	
-	· · · · · · · · · · · · · · · · · · ·	Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00