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Amend L09-65680

FILED SECTRETARISHE, FLORIDA SECTRETARISHE, FLORIDA SECTRETARISHE, FLORIDA

N. CAUSSEAUX

NOV 2 5 2009

EXAMINER

COVER LETTER

TO:	Registration So Division of Co				
SURII	CT.	GEMINI WORLD	OWIDE AIRWAYS, LLC		
SUBJECT: GEIVINI VVORLDVIDE AIRVAYS, LLC Name of Limited Liability Company					
The en-	closed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please	return all correspo	ondence concerning this matter	to the following:		
		LUIS	LUIS ENRIQUE VALDIVIESO		
	Name of Person GEMINI WORLDWIDE AIRWAYS, LLC				
	Firm/Company				
		2500 NW 79th AVENUE, SUITE #216			
		DC	DRAL, FLORIDA 33122		
			City/State and Zip Code	-	
		E-mail address: (animalair@live.com to be used for future annual report notification)		
For fur	ther information of	concerning this matter, please of	call:		
		IO ZAMORA, CPA	at (305) 794-7896 Area Code & Daytime Telephone Number		
	Name (of Person	Area Code & Daytime Telephone Numbe	er	
Enclos	ed is a check for t	the following amount:			
\$25	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certifie	ate of Status &	
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		ration Section on of Corporations Box 6327	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

GEMINI W	ORLDWIDE AIRWAY	S, LLC			
(<u>Name of the Limited Li:</u> (A Fl	ability Company as it now appea orida Limited Liability Company)	rs on our records.)			
The Articles of Organization for this Limited Liabi	ility Company were filed on	JULY 7, 2009	and assigned		
Florida document numberL090006568		` `	当一		
			是 3 三		
This amendment is submitted to amend the following	ing:		多 一 河		
A. If amending name, enter the new name of th	e limited liahility company be	re:	THO I		
The first the first three of the	e amount, company no	 -	and ssigned SECREFE FLOOR FLOO		
The new name must be distinguishable and end with the "L.L.C."	ne words "Limited Liability Comp	any," the designation "l	LC" or the abbreviation		
Enter new principal offices address, if applicable	e:				
(Principal office address MUST BE A STREET A	(ADDRESS)				
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE BO	<u></u>				
B. If amending the registered agent and/or registered agent and/or the new registered offic		our records, enter	the name of the new		
Name of New Registered Agent:					
New Registered Office Address:					
	Enter Florida street uddress				
	. Florida				
•	Citv		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

- Immending 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 **Type of Action** <u>Title</u> <u>Name</u> **Address** Dilson Prado De Fonseca **MGRM** ✓ Add 2500 NW 79th AVENUE Remove **SUITE #216** DORAL, FLORIDA 33122 ☐ Add Remove ☐ Add Remove Remove □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) **NOVEMBER 18** 2009 Dated Signature of a member or authorized representative of a member

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00