M0400001970

(Requestor's Name)		
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Business Entity Name)		
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		
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EXAMINER



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2012 JUN 28 PM 4: 35

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SLOKETARY OF STATE



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I2000000195

REFERENCE: 255473.

55473 7736440

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE: June 26, 2012

ORDER TIME : 1:44 PM

ORDER NO. : 255473-017

CUSTOMER NO: 7736440

CHANGE OF AGENT

NAME: APOLLO AVIATION CAPITAL,

L.L.C.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Becky Peirce

EXAMINER'S INITIALS:

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.

A DOLLO AND	ATION CADITAL A LO	
1. Name of the limited liability company: APOLLO AVI	ATION CAPITAL, L.L.C.	
 (a) Principal office address of limited liability company (Note: MUST BE STREET ADDRESS) 	: 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	
05/17/2004	M0400001970	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown on t	he records of the Florida Dept. of State:	
Registered Agent:	CT Corporation System	
Registered Office Address:	1200 S. Pine Island Road Plantation FL 33324	
	V Pagistared Office address: 88 8	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u>	v Registered Office address:	
NEW Registered Agent:	Corporation Service Company	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1201 Hays Street	
	Tallahassee ,FL 32301	
If the limited liability company is not organized under the limited that after the change or changes are made, the Florida street office of the registered agent will be identical. Or, in the can hereby confirmed that the change(s) was/were authorized be liability company or as otherwise provided in the articles of limited liability company. **The company of the c	t address of the registered office and the business use of a Florida limited liability company, it is you an affirmative vote of the members of the limited	
(Signature of a member or authorized representative of a member)	-	
Maureen Cathell, Authorized Person (Printed or typed name of signee)	-	
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the proam familiar with and accept the obligations of my position F.S. Or, if this document is being filed to merely reflect a confirm that the limited liability company has been notified	gree to act in this capacity. I further agree to per and complete performance of my duties, and I as registered agent as provided for in Chapter 608, hange in the registered office address, I hereby in writing of this change.	
	-	
By: Such Weight (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