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Florida Department of State
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To:
Division of Corporations
Fax Number : (850)205-0380

From:
Account Name : AGENTS AND CORPORATIONS, INC
Account Number : I20010000112
Phone : (302)575-0875
Fax Number : (302)575-0925

2007 APR 16 PM 3:27
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COR AMND/RESTATE/CORRECT OR O/D RESIGN

GW AVIATION SOLUTIONS, INC.

Certificate of Status	0
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DIVISION OF CORPORATIONS

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4/16/07

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**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS**

FILED

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: GW AVIATION SOLUTIONS, INC. SECRETARY OF STATE
TALLAHASSEE, FLORIDA
2. The principal office address: 267 Clinton Road, Antrim, NH 03440
3. The mailing address (if different): 267 Clinton Road, Antrim, NH 03440
4. Date of incorporation/qualification: 9/26/2001 Document number: P01000094350
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Amores Caridad, Esq.
294 Westward Dr.
Miami Springs, FL 33166

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Agents and Corporations, Inc.
300 Fifth Avenue South, Suite 101-330
(P.O. Box NOT acceptable)
Naples, FL 34102

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.



Gordon Amidon, CEO

(Printed or typed name and title)

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Agents and Corporations, Inc.


(Signature of Registered Agent)

4-16-07

(Date)

If signing on behalf of an entity:

John L. Williams

(Typed or Printed Name)

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)