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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN GOUACHE AIRSHIP LLC

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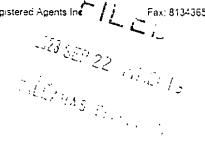
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SEP 2 2 2023

ARTICLES OF AMENDMENT TO 🕫 ARTICLES OF ORGANIZATION OF



Gouache Airship LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 06/12/18 and assigned Florida document number L18000143928 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 7901 4th St N Enter new principal offices address, if applicable: STE 300 (Principal office address MUST BE A STREET ADDRESS) St. Petersburg, FL 33702 7901 4th St N Enter new mailing address, if applicable: STE 300 (Mailing address MAY BE A POST OFFICE BOX) St. Petersburg, FL 33702 B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida spect address

New Registered Agent's Signature, if changing Registered Agent:

Thereby 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 605, 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.

, Florida

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
AMBR	MEDEIROS, CLAIRE	266 44TH AVE	□Add
		ST PETE BEACH, FL 33706	ØRemove
			□ Change
AMBR	MEDEIROS, CLAIRE	7901 4th St N STE 300	
		St Petersburg, Fl. 33702	□Remove
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Effective date, if other than the date of filing:			(optic	mal)	
If an effective date is listed, the date must be specific and cannot be	e prior to date	of filing or more	than 90 days after	filmg) Pursua	nt to 605,0201
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e record specifies a delayed effective date, but not an effected is filed	tive time, at	12:01 a.m. on (he curlier of: (b) The 90th (day after the
Dated September 22nd 2023					
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