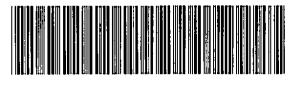
F15000005208

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
Office Use Only				



300363422333

04/21/21--01018--002 **35.00

4/3/21



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Meghan Groom meghan.groom@cscglobal.com

Date: April 15, 2021

Order#: 765760-003

Re: BLADE URBAN AIR MOBILITY, INC.

Enclosed please find:

XX ___ Change of Registered Agent and Office.

XX Check in the amount of \$\$35.00.

Please take the following action:

XX File in your office on a routine basis.

XX___ Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Meghan Groom c/o Corporation Service Company 251 Little Falls Drive

251 Little Falls Drive Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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

statement of cha	nge is submitted for a corporatio	617.0502, 607.1508, or 617.1508, Florida . on organized under the laws of the State of _ or registered agent, or both, in the State of I	DE
L. The name of t	he corporation: BLADE URBAN	AIR MOBILITY, INC.	
499 E 34TH ST	REET NEW YORK, NY 10016		
3. The mailing a	ddress (if different):		
4. Date of incorp	oration/qualification: 11/24/201	Document number: F15000	005208
	street address of the current regitment of State: (If resigned, enter	stered agent and registered office on file wiresigned)	th the
	CT CORPORATION SYSTEM	C/O CT CORPORATION SYSTEM	_
	1200 SOUTH PINE ISLAND R	OAD	_
	PLANTATION, FL 33324		
6. The name and (if changed):	street address of the new registe	red agent (if changed) and /or registered of	- lice
	Corporation Service Company		_
	1201 Hays Street		20;
P.O. Box NOT acceptable			
	Tallahassee	FL 32301	<u></u>
_		e street address of the business office of it	•
Such change wa authorized by th	s authorized by resolution duly e board, or the corporation has l	adopted by its board of directors or by an been notified in writing of the change.	officer so,
Sean Grenn	ah	SEAN GRENNAN	CFO —
— 9B72CC2E 的超级以下	e of an officer or director	Printed or typed name and ti	tie
l further agrée t of my duties, an document is bei corporation has	o comply with the provisions of	gent and agree to act in this capacity. all statutes relative to the proper and con the obligation of my position as registered ge in the registered office address, I herel change.	aplete performance I agent. Or, if this by confirm that the
$Bv: Y \to \alpha$	of Tokinhia	04/14/21	
_	nature of Registered Agent	Date	
n aigning on oci	nalf of an entity:		
	Asst. Vice President ped or Printed Name	_	
•	•		

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