L1400009742

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(Document Number)		
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08/28/22--01012--021 **25.00





COVER LETTER

TO: ' Registration Section **Division of Corporations**

Uplifting Air LLC

SUBJECT: _____

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

	Brad Lemley		2022 AUG
	·	Name of Person	
	Uplifting Air LLC		1 - 1
		Firm/Company	
	12231 Main St. #1196		
		Address	
	San Antonio, FL 33576		
		City/State and Zip Code	
	accounting@upliftingair.co		
	E-mail address: (to be used for future annual report notificatio	n)
For further information c	oncerning this matter, please ca	all:	
Melissa Rose		813 681-1600 at ()	
Name o	ř Person	Area Code Daytime Tele	phone Number
Enclosed is a check for th	ne following amount:		
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres	<u>85:</u> O anti a t	Street Address: Powietration Section	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Uplifting Air 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 $\frac{1/17/2014}{1/17/2014}$ and assigned Florida document number $\frac{L14000009742}{1/17/2014}$.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Uplifting Air and Services LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
	<u> </u>
Enter new mailing address, if applicable:	9 . P 111
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B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new registered</u> agent and/or the new registered office address here:

Name of New Registered Agent:	<u> </u>	
New Registered Office Address:	Enter Florida street ad	ldress
	City	Florida

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 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.

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

MGR = Manager AMBR = Authorized Member

.

<u>Title</u>	<u>Name</u>	Address	Type of Action
			🗆 Add
			Change
			🗆 Add
			Change
			🗆 Add
			□ Add
		<u> </u>	Add
			🗆 Remove
			Change
<u> </u>			🗆 Add
			Change

* D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated	August 16	2022	
	13 Mar	6 m. Ja 12 i	
	Signature	e of a member or authorized corresentative of a member	
Bra	d Lemley		