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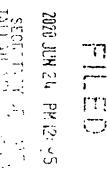
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D. BRUCE AUG 10 2020

COVER LETTER

TO: Registration : Division of C		•			
N924GM SUBJECT:	I, LLC				
	Name of Lin	nited Liability Company			
The enclosed Articles of	of Amendment and fee(s) are sul	omitted for filing.			
Please return all corresp	pondence concerning this matter	to the following:			
	Cater Randolph, Esq.				
		Name of Person			
	Mettler Randolph Massey	, et al			
		Firm/Company	<u> </u>		
	340 Royal Palm Way, Sui	te 100			
		Address			
	Palm Beach, Fl. 33480				
	crandolph@mettlerlaw.com	City/State and Zip Code			
	E-mail address:	(to be used for future annual report notif	ication)	202	
For further information	concerning this matter, please of	all:		2028 JUN SEC. 7	
Cater Randolph		561 833-9631		· · · · · · · · · · · · · · · · · · ·	1
Name	of Person		Telephone Number	i Ţĸ	;
Enclosed is a check for	the following amount:			15 15 15 15 15	.
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	e of Status &	
Mailing Addre	ess:	Street Address:			

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

N924GM, 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 12/16/2015 and assigned Florida document number L15000209006 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." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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 street address Florida City 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 Changing Registered Agent, Signature of New Registered Agent

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Sanford Ernest Reim	811 Runway Drive	
		Yakima, WA 98908	□Remove
			□Change
			□Add
			□Remove
			□Change
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fan effective date is li <u>Note:</u> If the date in: locument's effective	e date on the Departmen	ific and cannot be prior to dat s not meet the applicable s nt of State's records.	e of filing or more than 90 da statutory filing requiremen	its, this date will not be li	sted as tl
d is filed.	ciayed effective date, b	ut not an effective time, a	t 12:01 a.m. on the earlier	of: (b) The 90th day af	ter the
	JUNE 2-	2, 2020	O		
Dated		\cap			
Dated	ata Signature	e of a member or authorized	representative of a member		