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(Re	questor's Name)	
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PICK-UP	WAIT	MAIL
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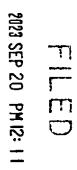
Office Use Only



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JUDINE DARY OF STATE
ALL AHASSEF, FLORIO





CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Talinassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 996795 7175508

AUTHORIZATION :

COST LIMIT : \$ 25,000

ORDER DATE: September 19, 2023

ORDER TIME : 2:12 PM

ORDER NO. : 996795-065

CUSTOMER NO: 7175508

DOMESTIC AMENDMENT FILING

NAME: BIRD DRIVE MITIGATION LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland-sorenson -- EXT#

EXAMINER'S INITIALS:

DocuSign Envelope ID: 1316EA70-3C9C-419B-8907-31ADD45EF1E6

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

FILED

BIRD DRIVE MITIGATION LLC

2023 SEP 20 PM 12: 11

(Name of the Lin	ited Liability Company as it now appea (A Florida Limited Liability Company)	irs on our records.)
	(A Florida Limited Liability Company)	TALLAHASSEE. FLORIDA
The Articles of Organization for this Limited Florida document number	Liability Company were filed on <u>Ju</u>	and assigned
This amendment is submitted to amend the fo	llowing:	
A. If amending name, enter the new name	of the limited liability company h	<u>ere</u> :
The new name must be distinguishable and contain the	words "Limited Liability Company," the	designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appl	cable:	
Principal office address MUST BE A STRE	ET ADDRESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE	E BOX)	
B. If amending the registered agent and/or agent and/or the new registered office addr		records, enter the name of the new registere
Name of New Registered Agent:	Corporation Service Company	
New Registered Office Address:	1201 Hays Street	<u> </u>
	Enter Flo	rida street address
	Tallahassee	, Florida 32301

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. alixers Weilard-Sonson, Aup

If Changing Registered Agent, Signature of New Registered Agent

DocuSign Envelope ID: 1316EA70-3C9C-419B-8907-31ADD45EF1E6 in amenuing Authorized rerson(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	Andre Radandt	681 W. North Avenue	□Add
		Suite 200	
		Oak Park, Illinois 60302	
MGR	Edward Schroeder	681 W. North Avenue	_
		Suite 200	
		Oak Park, Illinois 60302	
			🗆 Add
			□Remove
			□Add
			Remove
			□Change
			□Add
			□Remove
			□Change
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•	ding any other information, enter change(s) here: (Attach additional sheets, if neces			
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		RIDA	=	
(If an effect Note: If	e date, if other than the date of filing:	nal) iling.) Pursuan	t to 605. be liste	.0207 (3 ed as th
he record s ord is filed	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b)	The 90th da	ıy after	the
Dated	September 12 Edward Schroder AB28BBBF4404B0.			
	AB28B8B3F440480 Signature of a member or authorized representative of a member			
	Edward Schroeder, Manager			
	Typed or printed name of signee			

Filing Fee: \$25.00