L17000092165

(Re	questor's Name)	
(Add	dress)	<u>.</u>
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
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JUN 10 2020 S. YOUNG

COVER LETTER

TO:

Registration Section

Division of Cor	porations		
	ORTUNITY LLC		•
SUBJECT:	Name of Lin	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	VALENA R DRIGGERS		
		Name of Person	
	AIR & OPPORTUNITY L	LC	
	 	Firm/Company	
	206 DOGWOOD WAY		
		Address	
	PERRY, FL 32348		
		City/State and Zip Code	
	driggersvalena@gmail.com		
	E-mail address: (to be used for future annual report no	tification)
For further information c	oncerning this matter, please c	all:	
VALENA R DRIGGERS	S	850 843-2648	
Name o	f Person		me Telephone 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 Registration S	Section	Street Address: Registration S	
Division of C P.O. Box 632	•	Division of Co The Centre of	•
Tallahassee, I			oe Street, Suite 810

Tallahassee, FL 32303

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

AIR & OPPORTUNITY LLC

(Name of the Limited Liability Comp (A Florida Limited	Liability Company)	199 6
The Articles of Organization for this Limited Liability Company	y were filed on APRIL 25, 2017	and assigned
Florida document number L17000092165		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
The new name must be distinguishable and contain the words "Limited Liab	oility Company," the designation "LLC" or	the abbreviation "L.L.C."
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 agent and/or the new registered office address here:	address on our records, enter the	name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	·
	, Florid	aZip Code
		Zip Code
New Registered Agent's Signature, if changing Registered Agent	<u>:</u>	
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	e performance of my duties, and I provided for in Chapter 605, F.S.	am familiar with and Or, if this document is

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>	<u>Address</u>	Type of Action
MGR	JOHN C DRIGGERS	206 DOGWOOD WAY	□ Add
		PERRY, FL 32348	□ Remove
			
			□Remove
			☐ Change
			□Add
			Remove
			□ Change
			□Add
			□ Remove
			□Change
		□Add	
		□Remove	
			□Change
			□ Add
			☐ Remove
			□ Change

VALENA REED DRIGGERS 51% AND JOHN CRAWFORD DRIGGERS 49% [sective date, if other than the date of filing:		HN CRAWFORD DRIGGERS 50% TO:
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Signature of a member or authorized representative of a member		(AV 18 2020
	Mated	2020

Filing Fee: \$25.00