## LITOOO94722

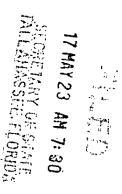
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## **COVER LETTER**

TO: Reg Div	istration Sect islon of Corpo	ion prations		
SUBJECT:		CKBIRD, LLC.		
SOBJECT.		Name of Limit	ted Liability Company	
		mendment and fee(s) are subn	•	
		LAWRENCE FRANKEL		
			Name of Person	<del> </del>
		SPIRE MANAGEMENT, L	LC.	
			Firm/Company	
		6365 COLLINS AVENUE,	APT. 2606	
			Address	<del></del>
		MIAMI, FLORIDA 33141		
			City/State and Zip Code	
		Infcpa@aol.com		
			be used for future annual report notifi-	cation)
For further in	nformation con	cerning this matter, please cal		
_ LAW	(LNB)	Familiel	at (973) 214-	
	Name of F	rerson	Area Code Daytime	Telephone Number
Enclosed is	check for the	following amount:		
₩ \$25.00 F	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 ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SPIRE BLACKBIRD, LLC.							
(Name of the Limited Liabil) (A Florid	ity Company as it now appears on our records.) a Limited Liability Company)						
The Articles of Organization for this Limited Liability ( Florida document number L17000094722	Company were filed on APRIL 27, 2017	and assigned					
This amendment is submitted to amend the following:							
A. If amending name, enter the new name of the lim	ited liability company here:						
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the designation "LLC" o	r the abbreviation "L.L.C."					
Enter new principal offices address, if applicable:		*****					
(Principal office address MUST BE A STREET ADD)	RESS)	<b>三</b>					
		<b>1 1 1 1 1 1 1 1 1 1</b>					
	•	15 N					
Enter new mailing address, if applicable:							
(Mailing address MAY BE A POST OFFICE BOX)		五郎 宝 (打)					
		9 7 7					
		<b>5 6</b>					
B. If amending the registered agent and/or registered agent and/or the new registered office add		enter the name of the nev					
Name of New Registered Agent:							
New Registered Office Address:							
	Enter Florida street address						
	, Flori						
	City	Zip Code					

## 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	LAWRENCE FRANKEL	6365 Collins Avenue, Apt. 2606	
		Miami Beach, Florida 33141	■ Remove
			Change
MGR	KEVIN WILK	1901 Olde Mill Forest Drive	
		Raleigh, North Carolina 27606	■ Remove
		·	Change
MGR	SPIRE MANAGEMENT, LLC.	6365 Collins Avenue, Apt. 2606	<b>=</b> Add
	A Florida limited Liability company	Miami Beach, Florida 33141	□ Remove
			Change
			Add
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Filing Fee: \$25.00