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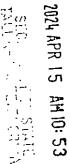
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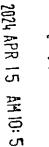
Office Use Only



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COVER LETTER

Division of Corporations GLACIER AIRCRAFT LEASING 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: J. Brock McClane Name of Person Brennan Manna & Diamond, P.L. Firm/Company 255 South Orange Avenue, Suite 700 Address Orlando, Florida 32801 City/State and Zip Code dakallas@bmdpl.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: J. Brock McClane Daytime Telephone Number Name of Person Enclosed is a check for the following amount: ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, ■ \$25.00 Filing Fee □ \$30.00 Filing Fee & Certificate of Status & Certificate of Status Certified Copy Certified Copy (additional copy is enclosed) (additional copy is enclosed)

Mailing Address:

TO:

Registration Section

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

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

Glacier Aircraft Leasing LLC		
(Name of the Limited Liability Company as it now appears (A Florida Limited Liability Company)	on our records.)	
he Articles of Organization for this Limited Liability Company were filed on	09/24/2019	and assigned
lorida document number		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liability company her	<u>e</u> :	
Blacier Aircraft 3 LLC		
he new name must be distinguishable and contain the words "Limited Liability Company," the des	signation "LLC" or the	abbreviation "L.L.C."
Inter new principal offices address, if applicable:		100
Principal office address MUST BE A STREET ADDRESS)		
meight office dames, most be histitien months.		
inter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
		2024 350 7711
3. If amending the registered agent and/or registered office address on our rec	ords antar the no	ma of the name regist
s. It amending the registered agent and/or registered office address on our rec gent and/or the new registered office address here:	orus, enter the na	
gent and/of the new registered office address here.		
		1 in 3
Name of New Registered Agent:		- 12 -
•		
New Registered Office Address:		
Enter Florid	la street address	့် ကို ထိ
	. Florida	
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 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
			□Add
			□Remove
			□Change
			□Add
			□Remove
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Note: If the date inserted in t	ate must be specific and cannot be prior	to date of filing or more than 90 days at able statutory filing requirements, t	otional) fer filing.) Pursuant to 605.0207 (his date will not be listed as t
e record specifies a delayed ef rd is filed.	Tective date, but not an effective ti	me, at 12:01 a.m. on the earlier of:	(b) The 90th day after the
DatedApril 8	. 2024	<u> </u>	
- 2 Rg	Signature of a member or auth	orized representative of a member	
11		•	

Filing Fee: \$25.00