# 121000041364

(Red	questor's Name)	
(Add	dress)	
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(City	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number	)
Certified Copies	_ Certificate	s of Status
Special Instructions to I	Filing Officer;	

Office Use Only



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RECEIVED

### Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 6/2/2021		**WALK	IN≠
ENTITY NAMEKIRA DE	ONE LLC		
	,		-
DOCUMENT NUMBER_			
	**PLEASE FILE THE ATTACHED AND RETURN**		
XXXX	Plain Copy	**WALE	liv
	Certified Copy		
1-1-1	Certificate of Status		
***	LEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY**		
	Certified Copy of Arts & Amendments		
	Certificate of Good Standing	· . ·	. •
	**APOSTILLE' / NOTARIAL CERTIFICATION**		
COUNTRY OF DESTINATI	ON		
NUMBER OF CERTIFICAT	ES REQUESTED	_	
TOTAL OWED \$25.00	ACCOUNT #: I20160000072	•	-
Please call Ting at the	e above number for any issues or concerns. Thank you so i	much!	

## COVER LETTER

TO: Registration So Division of Cor			
KIRA DRO			
SUBJECT:	Name of Lin	ited Liability Company	<del></del>
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Kelsey Polasek		
	4	Name of Person	·
	ZenBusiness PBC		
		Firm/Company	
	5511 Parkerest Drive STE	207	
		Address	
	Austin, Texas, 78731		
		City/State and Zip Code	<del></del>
	fulfillment@zenbusiness.co	om to be used for future annual report notification)	<del></del>
Exeluation information	concerning this matter, please c		
	-		
Kelsey Polasek c/o Zenl		at ()	
Name (	of Person	Area Code Daytime Telephone N	Sumber
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	Certified Copy Ce (additional copy is enclosed) Ce	D.00 Filing Fee. ertificate of Status & ertified Copy ditional copy is enclosed)
<u>Mailing Addre</u> Registration	Section	Street Address: Registration Section	
Division of C P.O. Box 632		Division of Corporations The Centre of Tallahassee	
Tallahassee.		2415 N. Monroe Street, St Tallahassee, FL 32303	

#### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

KIRA DRONE LLC		
( <u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on 1/21/2021	and assigned
Florida document number 1.21000041364		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lial	oility company here:	
Phin drone LLC		
The new name must be distinguishable and contain the words "Limited Liab	lity Company," the designation "LLC" or th	ie 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)		
		1 .
<ol> <li>If amending the registered agent and/or registered office igent and/or the new registered office address here:</li> </ol>	address on our records, enter the 1	name of the new registe
		: =
Name of New Registered Agent:		
New Registered Office Address:		语言
•	Enter Florida street address	AH 10 25
	, Florida	Zip Code
	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
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4			
ffective date, if other than the an effective date is listed, the date must tote: If the date inserted in this bloocument's effective date on the De	be specific and cannot be prior to check does not meet the application	to date of fitting or more than 91	(optional) 0 days after filing.) Pursuant to 605,020 ments, this date will not be listed a
record specifies a delayed effective is filed.	date, but not an effective tin	ne, at 12:01 a.m. on the ear	rlier of: (b) The 90th day after the
ated	. 2021	<u> </u>	
	Ilburshaid SR Signature of a member or autho		
/ /	Signatura of a mambar or autho	rized representative of a mem	her
	angulature of a member of autik.	rized representative or a mem	

Filing Fee: \$25.00