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Division of Corporations

Fax Number : (850)617-6383

From:

Jennifer L. Williamson, Esq.

Account Name : CRARY, BUCHANAN, BOWDISH, ET AL

Account Number : 076424001425 : (772)233-4602 Phone

: (772)223-4378 Fax Number

Enter the email address for this business entity to be used for future? annual report mailings. Enter only one email address please.

jlw@crarybuchanan.com Email Address:

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FLIGHT HOUSING, LLC

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(2/4) 06/25/2021 04:29:56 PM -0400

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	OUSING, LLC		
(<u>Name of the Limited Liability Com</u> (A Florida Limited	pany as it new appears Liability Company)	s on our records.)	
The Articles of Organization for this Limited Liability Companional L21000183803	y were filed on	04/20/2021	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lia	bility company he	<u>re</u> :	
N/A			
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the de	esignation "L.L.C" or the	albrevianor IC."
Enter new principal offices address, if applicable:	N/A		CAR S TI
(Principal office address MUST BE A STREET ADDRESS)			SSEE S
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A		FINE 36
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	e address on our re	ecords, <u>enter the n</u>	ame of the new registe
N/A			
Name of New Registered Agent:		·	
New Registered Office Address:	Enter Flor	ida street address	
		. Florida	
	Criv		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 chities, 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

(3/4) 06/25/2021 04:30:41 PM -0400

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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	BRETT SIPPERLY	10982 DENOEU ROAD	□_Abd
		BOYNTON BEACH, FL 33472	=Remove
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