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D. BRUCE FEB 25 2011.

COVER LETTER

	Registration Sec Division of Corp					
0.11P.111.00	Airbox Impe	erium, LLC				
SUBJECT	1:	Name of Lim	ited Liability Company			
The enclos	sed Articles of a	Amendment and fee(s) are sub	mitted for filing.			
Please retu	um all correspo	ndence concerning this matter	to the following:			
		Daniel J. Pasky				
			Name of Person			
		Holland & Knight LLP				
			Firm/Company			
		50 North Laura Street, Suit	te 3900			
			Address			
		Jacksonville, FI, 32202				
		daniel.pasky@hklaw.com	City/State and Zip Code		2022 FEB 17	
		E-mail address: (to be used for future annual report notific	cation)	FEB FEB	uera ra
For furthe	r information co	oncerning this matter, please co	all:)
Daniel J.	Pasky		205 999-6482 at ()			1
	Name o	f Person		Telephone Number	PM 12: 14 ST STATE	مسيه
Enclosed	is a check for th	ne following amount:				
■ \$25.0	0 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified (of Status &	

Mailing Address:

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

Airbox Imperium, LLC		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Jability Company)	
The Articles of Organization for this Limited Liability Company	were filed on October 8, 2021	and assigned
Florida document number 1.21000443285		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	lity 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)		50 622
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		1 100 TO Mark
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the</u>	name of the new registered
Name of New Registered Agent:	· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:	Enter Florida street address	
	. Florid	a
	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
AMBR	Gates Defense Systems, LLC	501 1st Avenue N., Suite 901	□Add
		St. Petersburg, FL 33701	■Remove
			□Change
AMBR	Michael P. Gates	501 1st Avenue N., Suite 901	
		St. Petersburg, Fl. 33701	□ Remove
			□ Change
			□Add
			Remove 7.22 Flance
			Add_DRemove
		 	Change
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Effective date, if other than the date of filing:	(optiona	al)	0207.4
Note: If the date inserted in this block does not meet the applicable statutory document's effective date on the Department of State's records.	filing requirements, this da	ate will not be liste	d as t
e record specifies a delayed effective date, but not an effective time, at 12:01 a rd is filed.	.m. on the earlier of: (b)	The 90th day after	the
Dated February 11			
() / / / /			

Typed or printed name of signee