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(City	/State/Zip/Phone	e #)
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Special Instructions to F	iling Officer:	





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то:	Registration Se Division of Cor			
SUBJEC		7T LLC (Address Chnage at ar	ticles of Organization)	
SUBJEA	·-!:	Name of Lim	ited Liability Company	
The encl	losed Articles of	Amendment and feers) are sub	united for filing	
Please re	aturn all correspo	ondence concerning this matter	to the following:	
		Adeel Shuja Butt		
			Name of Person	
		Blue Bird GT LLC		
			Firm Company	
		2010 NE 182 Pl, Unit #142	Address	
			Address	
		Citra, FL 32113		
		Bluebirdgtlle@gmail.com	City/State and Zip Code	
			to be used for future annual report notif	(teation)
For furth	ier information e	oncerning this matter, please c	all:	
Blue Bi	rd GT LLC		352 2544125 at()	
	Name o	t Person	Area Code Daytime	e Telephone Number
Enclosed	d is a check for th	he following amount:		
■ \$25	.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Sectificate of Status & Certificate Copy (additional copy is enclosed)
	Mailing Addres		Street Address:	
	Registration !		Registration Sec	

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2022 JUN - 1 AM 11:55

Zip Code

Blue Bird GT LLC		est were				
(<u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now appears on our records.) Liability Company)	Seghetary of state Tallahassee, fl				
The Articles of Organization for this Limited Liability Company Florida document number 1,22000054384	y were filed on February 1, 2022	and assigned				
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the limited lial	bility company here:					
The new name must be distinguishable and contain the words "I imited East	odity Company," the designation "El C" or th	be abbreviation "L.L.C."				
Enter new principal offices address, if applicable:	2010 NF 182 PI					
(Principal office address MUST BE A STREET ADDRESS)	Unit #142					
	Citra, FL 32113					
Enter new mailing address, if applicable:	2010 N1, 182 PI					
(Mailing address MAY BE A POST OFFICE BOX)	Umr #142					
	Citra, F1, 32113					
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 i</u>	name of the new registered				
Name of New Registered Agent:						
New Registered Office Address:	Liner Florida street address					
	. Florid:					

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 hability company has been notified in writing of this change.

Citi

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>	Name	<u>Address</u>	Type of Action
AMBR	Adeel Shuja Butt	2010 NE 182 Pl Unit #142 Citra, FL 32113	= Add
		4824 177TH PLACE SE, BOTHELL, WA 98012	■Remove
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			□Remove
			□Change
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rective date, if other than the neffective date is listed, the date medee: If the date inserted in this becument's effective date on the E	ock does not	t meet the ap	pplicable :	le of filing o	or more than iling requi	(opti 90 days after rements, thi	onal) r filing.) s date v	Pursuant to fill not be	605.0203 listed as
cord specifies a delayed effective filed.	e date, but n	ot an effecti	ive time, a	it 12:01 a.	m, on the o	rarlier of: (l) The	90th day a	fter the
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ted May 19th	Ideel S	linga							

Filing Fee: \$25.00