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DIVISION OF CORPORATIONS

27 APR 25 AH IO: 06

T. MATTHEWS JUN 14 2022

COVER LETTER

Registration Section

Tallahassee, FL 32314

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rt notification)
48
aytime Telephone Number
☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>ss:</u> n Section
Corporations
of Tallahassee onroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



	Buzzard Aviation	ı. LLC	22 APR 25	am 10x 06
(Name of the Limit	ed Liability Company as (A Florida Limited Liabili	it now appears on our r ty Company)	ecords.)	
				and position of
The Articles of Organization for this Limited L	iability Company were	filed on		and assigned
Florida document number 1.22000160053	·			
This amendment is submitted to amend the following	owing:			
A. If amending name, enter the new name o	f the limited liability	company here:		
N/A	<u> </u>			7. C M. F. (7.22
The new name must be distinguishable and contain the v	vords "Limited Liability Co	ompany," the designation	"LLC" or the abb	reviation "L.L.C.
Enter new principal offices address, if applic	cable: N/	A		
(Principal office address MUST BE A STREE	ET ADDRESS)			
Enter new mailing address, if applicable:	N/	A		
(Mailing address MAY BE A POST OFFICE	BOX)			
intering usure, Marie Date 111				
B. If amending the registered agent and/or agent and/or the new registered office addre	registered office addr ess here:	ess on our records, <u>s</u>	enter the name	e of the new regis
Name of New Registered Agent:	N/A			
New Registered Office Address:	<u></u>	Enter Florida street	address	·····
			171 a.u.t. 4	
			Florida	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
AMBR	William A Ates	3783 Ward Basin RD	□Add
		Milton, FL 32583	A Remove
			□Change
			□Add
			□Remove
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			□Change
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			□Change
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			□Change

N/A		
		
	N/ /A	
ffective date, if other than (he date of filing: (optional))) (7 (
an effective date is listed, the date of the date of the listed in this	nust be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02 block does not meet the applicable statutory filing requirements, this date will not be listed	as t
	Department of State's records.	
record specifies a delayed effect lis filed.	tive date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after t	he
is facu.		
ated April 20	2022	
ateu		
	Du Mill	
	Signature of a member or authorized representative of a member	
	Greg Miller	
	Typed or printed name of signee	