Electronic Finns Co

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

Phone : (307)200-2803

Fax Number : (855)330-1010

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 🚊 ADAPTIVE AEROSPACE LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

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Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Adaptive Aerospace LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L22000180672 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liab		signed
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L	.L.C."
Enter new principal offices address, if applicable:	722 Apex Rd, Suite E	
(Principal office address MUST BE A STREET ADDRESS)	Sarasota, FL 34240	
Enter new mailing address, if applicable:	722 Apex Rd, Suite E	
(Mailing address MAY BE A POST OFFICE BOX)	Sarasota, FL 34240	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, <u>enter the name of the ne</u>	
	0	
New Registered Office Address:	Enter Florida street address	
	Florida	
	Cuy 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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR =	Manager	
AMBR =	Authorized	Membe

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Add
			□Remove
			□ Change
			□Remove
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(If an effective date is list Note: If the date ins	other than the date of filing:	0207 (ed as 1
he record specifies a dord is filed.	delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after	r the
Dated March 8	2023 Signature of a member or authorized representative of a member	
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Filing Fee: \$25.00