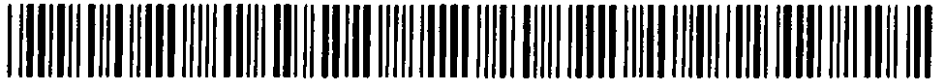


Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

L22000456732

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((1123000373573 3)))



H230003735733ABCO

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : GINN & PATROU, PA
Account Number : 120190000124
Phone : (904)461-3000
Fax Number : (844)730-9828

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

Email Address: gpatrou@ginnpatrou.com

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
BOB BLANDFORD AIR, LLC**

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

FILED
2023 OCT 27 PM 4:23

DIVISION OF CORPORATIONS
FILED

2023 OCT 27 PM 4:35
FILED

RECEIVED
DIVISION OF CORPORATIONS
FILED

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Bob Blandford Alt, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 11/14/2022 and assigned
Florida document number L22000486732

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable: 460 A1A Beach Blvd
(Principal office address MUST BE A STREET ADDRESS) St. Augustine, FL 32080

Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

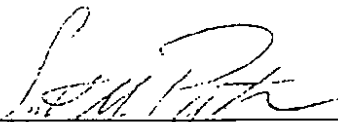
B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: Ginn & Patrou, PLLC
New Registered Office Address: 460 A1A Beach Blvd
Enter Florida street address
St. Augustine, Florida 32080
City Zip Code

2023 OCT 27 PM 4:55
FILED
CLERK OF CIRCUIT COURT
JACKSONVILLE

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>	<u>Address</u>	<u>Type of Action</u>
MGR	Robert Blandford	1958 Eventide Ave	<input type="checkbox"/> Add
		St. Johns FL 32259	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	992M, LLC	460 A1A Beach Blvd	<input checked="" type="checkbox"/> Add
		St. Augustine, FL 32080	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

Filing Fee: \$25.00