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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 : (813)436-5206

**Ent	er	the	email	address	for	this	busin	ess	entity	to	be	used	for	futi	ıre '
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PROVIEW DRONES, LLC

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Corporate Filing Menu

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5/1/2024 10:44:38 PDT

To: 18506176383

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Fax: 8134365206

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ProView Drones, LLC		·
(Name of the Limited Liability Compa (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L24000158011</u>	were filed on 04/02/24	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	illity company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "Ll.C" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable:	1191 US Highway 1, Suite 1044	
(Principal office address MUST BE A STREET ADDRESS)	Vero Beach, FL 32960	
Enter new mailing address, if applicable:	1191 US Highway 1, Suite 1044	
(Mailing address MAY BE A POST OFFICE BOX)	Vero Beach, FL 32960	
		202
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the nam	ne of the new register
		-0
Name of New Registered Agent:		
New Registered Office Address:	C. Clair	8
	Enter Florida street address	^ [*])
	, Florida	Zip Code
	Cay	zip Coxie

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.

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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	Address	Type of Action
AMBR	SANTIAGO, ABNER	1191 US Highway 1, Suite 1044	□Add
		Vero Beach, FL 32960	□Remove
			⊡ Change
			□Add
			□Remove
			🗀 Add
			□Remove
			□Remove
			Change
			□Add
			□Remove
			□Change
			□ Add
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			Changa

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specific and cannot be prior does not meet the applic	to date of filing or mor able statutory filing	(optional e than 90 days after filing requirements, this date) g.) Pursuant to 605,0207 (c will not be listed as t
e of filing:		(optional)
<u>-</u>			
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