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.

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 Phone : (323)962-8600 Fax Number : (323)389-0502

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

Email:	Address:			

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **BLUE SNOW BIRDS LLC**

Certificate of Status	0
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K. SALY

SEP 17 2024

Electronic Filing Menu Corporate Filing Menu

Help

COVER LETTER

From: Rajiv Srivastava

TO: Registration Sec Division of Corp					
	W BIRDS LLC				
SUBJECT:	Name of Limi	ited Liability Company	···		
	Amendment and fee(s) are sub-				
	Mike Town				
		Name of Person			
Legalzoom.com. Inc.					
		Firm/Company			
9900 Spectrum Dr					
	Address				
	Austin, TX 78717				
	maher.azem@gmail.com	City/State and Zip Code			
		o be used for future annual report no	tification		
For further information ed	meetning this matter, please ca	ill:			
Mike Town 800 773-0888					
Name of	Person	at {} Area Code Dayiii	me Telephone Number		
Enclosed is a check for th	e following amount:				
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	■ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy Gadditional copy is enclosed)		

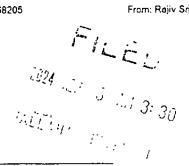
MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**



BLUE SNOW BIRDS LLC		
(<u>Name of the Limited Liability Con</u> (A Florida Limite	npany as it now appears on our records.) ed Liability Company)	
he Articles of Organization for this Limited Liability Compalorida document number 1.240(0)382252	ny were filed on <u>08/30/2024</u>	and assigned
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited li	ability company here:	
Blue Snowbirds LLC		
he new name must be distinguishable and contain the words "Limited Lie	ability Company," the designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
3. If amending the registered agent and/or registered		enter the name of the
registered agent and/or the new registered office address h	<u>ere</u> :	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flori	da
	City	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>	<u>Address</u>	Type of Action
AMBR	Maher Azem	6592 Devlin I.n	
			= Add
		Wesley Chapel.FL, 33545	☐ Remove
			☐ Change
		-	□ Remove
			Change .
	·		<u></u>
			بې Add □.Add ئ Remove □
			☐ Change
			□ Remove
			Change
			□ Remove
		4	Change
			Add
			☐ Remove
			7 a

To:

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00