## FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPE	ROVAL
DMB Number:	3235-0287
Estimated averag	e burden
ours per respons	se 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Ty	pe Response	s)																	
1. Name and Address of Reporting Person * Triple8, LLC					2. Issuer Name and Ticker or Trading Symbol Zanite Acquisition Corp. [ZNTE]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner							
ONE SECURITY BENEFIT PLACE					3. Date of Earliest Transaction (Month/Day/Year) 03/09/2021							Office	er (give title belo	w)	Other (spe	ify belov	w)		
(Street) TOPEKA, KS 66636				4. If	4. If Amendment, Date Original Filed(Month/Day/Year)							6. Individual or Joint/Group Filing(Check Applicable Line)  Form filed by One Reporting Person  X. Form filed by More than One Reporting Person							
(City) (State) (Zip)						Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned													
1.Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Year		h/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr. 8)		4. Securities Acquired (or Disposed of (D) (Instr. 3, 4 and 5)		) `	A) 5. Amount of Securities Beneficially Owned Followin Reported Transaction(s) (Instr. 3 and 4)		Following	Ownership Form: Direct (D)		Beneficial Ownership				
								Coo	le	v	Amount	(A) or (D)	Price	2			or Indir (I) (Instr. 4		nstr. 4)
Class A (	Common S	Stock	03/09	9/2021				S			20,133	D \$	§ 10.222	9 2,282,	657		D (1)		
Reminder: 1	Report on a s	separate line	for each		Deriv	ative Sec	curi	ties Ac	equire	Per cor the	rsons wh ntained i form dis Disposed	no responding this for splays and of, or Be	orm ar a curre	e not requently valid	ction of inf uired to res I OMB conf	spond unle	ess	EC 14	74 (9-02)
	_	T	_		(e.g., ]		s, w	1	ts, op		ıs, conver				1				1
1. Title of Derivative Security (Instr. 3)  Price of Derivative Security		ise (Month/Day/Year		Execution Da Day/Year) any		4. Transaction Code Year) (Instr. 8)		Number		an (M	6. Date Exercisable and Expiration Date (Month/Day/Year)		An Un Sec	Fitle and count of derlying curities str. 3 and		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Own Forn Derri Sect Direct or In		(Instr. 4)
						Code	V	(A)	(D)	Da Ex	ate ercisable	Expirati Date	ion Tit	Amount or Number of Shares					

### **Reporting Owners**

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Triple8, LLC ONE SECURITY BENEFIT PLACE TOPEKA, KS 66636		X					
Eldridge Industries, LLC 600 STEAMBOAT ROAD, FLOOR 2 GREENWICH, CT 06830		X					
Boehly Todd L 600 STEAMBOAT ROAD, FLOOR 2 GREENWICH, CT 06830		X					

#### Signatures

Triple8, LLC By: /s/ Joseph Wittrock, Manager and Vice President	03/11/2021	
Signature of Reporting Person	Date	
Eldridge Industries, LLC, By: /s/ Todd Boehly, Authorized Signatory  "Signature of Reporting Person	03/11/2021 Date	
/s/ Todd L. Boehly	03/11/2021	
∴Signature of Reporting Person	Date	

#### **Explanation of Responses:**

- \* If the form is filed by more than one reporting person, see Instruction 4(b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- Triple8, LLC is indirectly controlled by Eldridge Industries, LLC ("Eldridge"). Todd L. Boehly is the indirect controlling member of Eldridge, and in such capacity, may be (1) deemed to have voting and dispositive power with respect to the shares. Eldridge and Mr. Boehly disclaim beneficial ownership of the shares, except to the extent of their pecuniary interest therein.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.