

(Red	juestor's Name)	
(Add	ress)	
(Add	ress)	
(City	/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bus	iness Entity Nan	ne)
(Doc	ument Number)	
(500		
Certified Copies	Certificates	of Status
Special Instructions to F	iling Officer:	
		ľ
		!
<u> </u>		





03/19/24--01031--012 **25.00





COVER LETTER

		istration Sec ision of Corp				
		SK Advisory	Services, LLC			
SUBJEC	, T:		Name of Lim	ited I. ability Company		, =
			Amendment and fee(s) are sub	•		
riease re	aurn	au correspor	dence concerning this matter	to the topowing:		
			Frank G. Podesta, Florida f	3ar No. 0090488		
				Name of Person		
			FGP Law, LLC			
				Lirm Company		
			555 Sun Valley Drive, Suit			
				Address		
			Roswell, Georgia 30076			
			fpodesta@fgplaw.com	City State and Zip Code		
			- ···	to be used for future annual r	eport notification)	
For furth	ier in	formation co	ncerning this matter, please co	dt:		
Frank G.	. Pod	lesta			-5143	
		Name of	Person	at () Area Code	Daytime Telephon	e Number
Enclosed	l is a	check for the	e following amount:			
■ \$25.	00 F	iling Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy radiational copy is enclosed.	osed)	660.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address:

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

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

024 HAR 19 PH 1: 3

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SK Advisory Services, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Flability Company) The Articles of Organization for this Limited Liability Company were filed on $\underline{\underline{\text{October 29, 2020}}}$ _____ and assigned Florida document number | L20000344226 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: n/a The new name must be distinguishable and contain the words "Limited I ability Company," the designation "LLC" or the abbreviation "LLC." n/a 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) 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: Stephen Paul Kingston Name of New Registered Agent: 330 Sunny Isles Boulevard, Unit 1805 New Registered Office Address: Enter Florida street address ___, Florida 33160 Zip Code North Miami Beach 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 agr**₹€5**0 comply withy he provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar 📆 h 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

1) Changing Registered Agent, Signature of New Registered Agent

company has been notified in writing of this change.

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
MGR	Stephen Paul Kingston	330 Sanny Isles Blvd., Unit 1805	≣ Add
		North Miami Beach, Florida 33160	□Remove
			□Change
MGR	Svetlana Kropp	330 Sunny Isles Blvd., Unit 1805	□ Add
		North Miami Beach, Florida 33160	Remove
			[]Change
			□Add
			□Remove
			[]Change
			□Add
			□Remove
] Change
			
		TALLAHA	HAR THE
		SS C	P
		بر ترح	မ
			□Change

n/a						
						
						
						
			- 	_		
						
***				<u> </u>		
ctive date, if other tha	on the data of fili	i		((antional)	
effective date is listed, the da	ate must be specifie a	and cannot be pric	n to date of filing c	r more than 90 days	after filing.) Pu	irsuant to 605
If the date inserted in ment's effective date on	this block does no the Department o	t meet the appli f State's record	cable statutory f	iling requirements	, this date wil	I not be list
ment serretive date on	the toeparation of	T.Mare 3 Teerra				~3
	er die der besch		·i 12.01		f: (b) Th	2027 AR 19
ord specifies a delayed e filed.	nective date, but n	iot an effective	ame. at 12:01 a.	n, on the earner o	۱. (۱) النجم	學的學
					7	=
, March 15		2024				
d		-			רי	유유
			ÌC		- i.	PH :
	Signature of	weighter or uni	notized representation	live of a member		<u>- 3</u>