## L21000230152

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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Edward S Hand Jr 54082 Marlee Road Callahan FL 32011

Registration Division
Division of Corporations
Post Office Box 6327
Tallahassee Florida 32314

Please find the Request For Limited Liability Company Name Change. The name will be changed from Encore Communications Group LLC the Document Number is 21000230152. The new Limited Liability Company will be named: Skyy Equities Ilc.com

Kindest Regards,

Edward S Hand Jr, Managing Partner

Enclosures including this cover page:

## **COVER LETTER**

	Registration So Division of Co						
cuntro		mmunications Group LLC					
SUBJEC	.1:	Name of Lin	nited Liability Company		_		
The enclo	osed Articles of	Amendment and fee(s) are sub	bmitted for filing.				
Please ret	turn all correspo	ondence concerning this matter	r to the following:				
		Edward S Hand Jr					
			Name of Person				
		54082 Marlee Road	Firm/Company		SECRI	2021 SE	<u>-i</u>
		Callahan, Florida 32011	Address		TARY OF	2021 SEP -1 PM 3: 16	
		eshjr1@gmail.com	City/State and Zip Code	-	STATE E.FL	3: 16	782
		b-mail address; (	(to be used for future annual r	report notification)	_ ``		
For furthe	er information c	oncerning this matter, please c	all:				
Edward S	S Hand Jr		904 378 at ()	1400.3			
	Name o	f Person	Area Code	Daytime Telephone Num	iber		
Enclosed	is a check for th	ne following amount:					
<b>≘</b> \$25,0	O Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is encl	Certif losed) Certif	Filing Fee. Icate of Sta Ied Copy mateopy is er	itus &	
	Registr Divisio P.O. Bo	ING ADDRESS: ation Section n of Corporations ox 6327 issee, F1, 32314	Registrati Division o Clifton Bu	COURIER ADDRESS on Section of Corporations uilding cutive Center Circle	:		

Tallahassee, Ft. 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Encore Communications Group LLC		
( <u>Name of the Limited Liability Compa</u> (A Florida Limited	my as it now appears on our record Liability Company)	<u>(s.)</u>
The Articles of Organization for this Limited Liability Company  **Iorida document number   1.21000230152	were filed on 13, July 2021	and assigned
florida document number		
his amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited liab</u>	ility company here:	
Skyy Equities IIc		
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC	" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	54082 Marlee Road	
Principal office address MUST BE A STREET ADDRESS)		17.C
		SEP SEP
		上
Inter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		E S
		16 16 E
	-	
3. If amending the registered agent and/or registered of	Tice address on our records	s, enter the name of the
<u>egistered agent and/or the new registered office address her</u>	<u>u</u> ;	
Name of New Registered Agent:		·
New Registered Office Address:		
TVENT REGISTERE VALUESS.	Enter Florida street address	<b>S</b>
	* 11	.,
•	F10	orida 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 Title Name Address Type of Action \_□ Add ☐ Remove \_□ Change \_□ Add \_□ Remove \_ Change ယ္ <u>\_</u>□ Change □ Add \_□ Remove \_□ Change □ Add \_□ Remove ☐ Change \_□ Add □ Remove

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Effective date, if other than the fan effective date is listed, the date mus Note: If the date inserted in this bl document's effective date on the D	ock does not meet the	applicable statutor	ng or more than 90 or ry filing requireme	_ (optional) ays after filing.) ents, this date v	Pursuan vill <b>not</b>	t to 605.0207 be listed as
ne record specifies a delayed The 90th day after the rec	d effective date, b ord is filed.	ut not an effec	tive time, at 1	2:01 a.m. o	n the	earlier of
30, August Dated	2021					
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Typed or printed name of signee

Filing Fee: \$25.00