L14000007740

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

T Burch AUG -5 2014

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: SKY FLORIDA SERVICES LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

SOL G. VELASQUEZ
Name of Person

Firm/Company

10503 SW 134 PLACE
Address

MIAMI / FL and 33186
City/State and Zip Code

TAYLOR@TLTAYLORFINANCIAL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

BARBARA CARINO at (305) 251-6000
Name of Person — Area Code — Daytime Telephone Number

Enclosed is a check for the 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 (additional 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

FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 16, 2014

SOL G. VELASQUEZ
10503 SW 134 PLACE
MIAMI, FL 33186

SUBJECT: SKY FLORIDA SERVICES, LLC
Ref. Number: L14000007740

We have received your document for SKY FLORIDA SERVICES, LLC and your check(s) totaling $25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date must be specific and cannot be prior to the date of filing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tim Burch
Regulatory Specialist II

Letter Number: 714A00015309

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

SKY FLORIDA SERVICES LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 01/10/2014 and assigned Florida document number L14000007740.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

10503 SW 134 PLACE
MIAMI FL 33186

Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

10503 SW 134 PLACE
MIAMI FL 33186

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TALLAHASSEE, FLORIDA

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:

Name of New Registered Agent: BARBARA CARINO

New Registered Office Address: 9746 SW 184 STREET
Enter Florida street address

MIAMI, **Florida** 33157
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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

Title	Name	Address	Type of Action
MGR	SOL G VELASQUEZ	10503 SW 134 PLACE, MAIMI, FL 33186	■ Add
			☐ Remove
MGR	CAMILO CAMPUZANO	10503 SW 134 PLACE, MIAMI, FL 33186	■ Add
			☐ Remove
			☐ Add
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TALLAHASSEE, FLORIDA

D. **If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

E. **Effective date, if other than the date of filing: _____ (optional)**
(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated July 29-, 2014.

Signature of a member or authorized representative of a member

CAMILO CAMPOZANO.
Typed or printed name of signee

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TALLAHASSEE, FLORIDA

Filing Fee: $25.00