

LD6000020397

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DIVISION OF CORPORATIONS

O SIMMONS
DEC 16 2016

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Blue Sky Holdings, 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:

Pedro P. Saez

Name of Person

Saez and Associates

Firm/Company

777 Brickell Avenue, Suite 1110

Address

Miami, Florida 33131

City/State and Zip Code

psaez@saezlaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jorge Diaz-Guma

305 358 4277
at ()

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

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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>	<u>Type of Action</u>
MGR	Hjalmar J. Gibelli Gomez	20201 E. Country Club Dr.,	<input type="checkbox"/> Add
		STE 908	<input checked="" type="checkbox"/> Remove
		Miami, FL 33180	<input type="checkbox"/> Change
MGR	Diego Leandro Gibelli Reyes	20201 E. Country Club Dr.,	<input checked="" type="checkbox"/> Add
		STE 908	<input type="checkbox"/> Remove
		Miami, FL 33180	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

n/a

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E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated December 9, _____

2016

Signature of a member or authorized representative of a member

DEDR O P SAEZ

Typed or printed name of signee