

Division of Corporations

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L02000025889

Florida Department of State
Division of Corporations
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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
SKY TOP ENTERPRISES, L.L.C.**

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SEP 29 2016

J. HARRIS

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COVER LETTER**TO: Registration Section
Division of Corporations****SUBJECT: SKY TOP ENTERPRISES, L.L.C.**_____
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:

STEPHEN R. LOONEY, ESQ.

Name of Person

DEAN MEAD EGERTON BLOODWORTH CAPOUANO & BOZARTH, P.A.

Firm/Company

420 S ORANGE AVENUE, SUITE 700

Address

ORLANDO, FL 32801

City/State and Zip Code

jlf21959@aol.com

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

For further information concerning this matter, please call:

STEPHEN R. LOONEY, ESQ.

at ()

407 428-5128

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 &
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(additional copy is enclosed)☐ \$60.00 Filing Fee,
Certificate of Status &
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(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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**ARTICLES OF AMENDMENT
 TO
 ARTICLES OF ORGANIZATION
 OF**

SKY TOP ENTERPRISES, L.L.C.

(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 10/02/2002 EFF 09/26/2002 and assigned Florida document number L02000025889

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 contain 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)

3326 BUTLER BAY NORTH

WINDERMERE, FL 34786

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

3326 BUTLER BAY NORTH

WINDERMERE, FL 34786

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:

JORGE L. FLORIN

New Registered Office Address:

3326 BUTLER BAY NORTH

Enter Florida street address

WINDERMERE

, Florida 34786

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

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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>
PRES	JORGE L. FLORIN	3326 BUTLER BAY NORTH	<input type="checkbox"/> Add
		WINDERMERE, FL 34786	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	JORGE L. FLORIN	3326 BUTLER BAY NORTH	<input checked="" type="checkbox"/> Add
		WINDERMERE, FL 34786	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
V	JOY RAY	3326 BUTLER BAY NORTH	<input type="checkbox"/> Add
		WINDERMERE, FL 34786	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	CAROL PAWLEY	3326 BUTLER BAY NORTH	<input type="checkbox"/> Add
		WINDERMERE, FL 34786	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	CAROL ADAMS	3326 BUTLER BAY NORTH	<input type="checkbox"/> Add
		WINDERMERE, FL 34786	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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 TALLAHASSEE, FL

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

ARTICLE I OF THE ARTICLES OF ORGANIZATION ARE AMENDED AS FOLLOWS:

ARTICLE I - NAME AND PRINCIPAL OFFICE

The name of this limited liability company is SKY TOP ENTERPRISES, L.L.C., and its principal office and mailing address is located at 3326 Butler Bay North, Windermere, FL 34786.

ARTICLE V OF THE ARTICLES OF ORGANIZATION ARE AMENDED AS FOLLOWS:

ARTICLE V - MANAGEMENT

This organization is to be managed by a manager or managers. The name and address of the manager are:

Jorge L. Florin, 3326 Butler Bay North, Windermere, FL 34786.

ARTICLE VI OF THE ARTICLES OF ORGANIZATION ARE AMENDED AS FOLLOWS:

ARTICLE VI - REGISTERED OFFICE AND AGENT

The street address of this limited liability company's registered office is 3326 Butler Bay North, Windermere, Florida 34786, and the name of this limited liability company's registered agent is JORGE L. FLORIN.

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 §05.0207 (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

September 27, 2016.

Signature of a member or authorized representative of a member

Jorge L. Florin
Typed or printed name of signer

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Filing Fee: \$25.00

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