## L03000039144

(R	Requestor's Name)
(A	Address)
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(C	City/State/Zip/Phone #)
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(C	Document Number)
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## **COVER LETTER**

tO:	Registration Se Division of Cor		•	1
			riders, LLC	<i>6</i>
SUBJE	CCT:	Name of Lim	ited Liability Company	<u></u>
The end	closed Articles of .	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		Larry Vernon Rider		
			Name of Person	
		SkyRiders, LLC		
			Firm/Company	
		7484 Marina Drive		
			Address	
		Sarasota, FL 34231		
			City/State and Zip Code	
		lvrrider@outlook.com		(f
			to be used for future annual report noti	neation)
or furt	ther information co	oncerning this matter, please of	all:	
Larry f	Rider		(941) 925-9800 at ( )	
	Name o	f Person	Area Code Daytim	e Telephone Number
Enclose	ed is a check for th	e following amount:		
□ <b>\$</b> 23	5.00 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)
	MARTINE A A A	_	e4	

TO:

Registration Section,

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SKYRIDERS, L	LC		于975 一	
(Name of the Limited Liability Company as (A Florida Limited Liabil	s it now appears on our lity Company)	records.)	SSON S	
The Articles of Organization for this Limited Liability Company were	e filed on10/0	06/2003	and assign	ned
Florida document numberL0300039144				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liability	company here:			
SKYRIDERAERO, LLC				
The new name must be distinguishable and contain the words "Limited Liability C	ompany," the designation	n "LLC" or the a	bbreviation 11C	
Enter new principal offices address, if applicable:	7484 N	IARIANA DRI	VE	
(Principal office address MUST BE A STREET ADDRESS)	SARSO	OTA, FL 3423	1-7922	
	7404 N	TADIANA DD		<del></del>
Enter new mailing address, if applicable:	7484 MARIANA DR			
Mailing address MAY BE A POST OFFICE BOX)	SARAS	SOTA, FL 342	31-7922	
B. If amending the registered agent and/or registered office addragent and/or the new registered office address here:  Name of New Registered Agent:	ess on our records,	enter the nan	ne of the new re	egistered
N. D. C. LOW ALL				
New Registered Office Address:	Enter Florida street	address		
		. Florida		
	City	, <u></u>	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

<u>Title</u>	<u>Name</u>	Address	Type of Action
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a delayed effective date,	, but not ar	n effective	time, at 12:0	)1 a.m. on the	earlier of: (b)	The 90th day	ifter the
08 JANUARY	•	2020	2	7			
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te ec	, if other than the date is listed, the date must be spite inserted in this block doestive date on the Department and delayed effective date.	if other than the date of filing: is listed, the date must be specific and cate inserted in this block does not meetive date on the Department of States a delayed effective date, but not an O8 JANUARY	if other than the date of filing:  is listed, the date must be specific and cannot be price inserted in this block does not meet the applicative date on the Department of State's recordes a delayed effective date, but not an effective 08 JANUARY 2020  Signature of a member or automatical states and selective of a member or automatical selection.	if other than the date of filing:  It is listed, the date must be specific and cannot be prior to date of filite inserted in this block does not meet the applicable statute extive date on the Department of State's records.  It is a delayed effective date, but not an effective time, at 12:0  OB JANUARY  2020  Signature of a member or authorized representations.	if other than the date of filing:  It is listed, the date must be specific and cannot be prior to date of filing or more than the inserted in this block does not meet the applicable statutory filing requirective date on the Department of State's records.  It is a delayed effective date, but not an effective time, at 12:01 a.m. on the second statutory date.	c) if other than the date of filing:  (option is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after fit to inserted in this block does not meet the applicable statutory filing requirements, this continued date on the Department of State's records.  (See a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b)  (b)  (c)  (b)  (c)  (c)  (d)  (d)  (d)  (e)  (e)  (e)  (f)  (f)  (g)  (g)  (g)  (g)  (g)  (g	is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to te inserted in this block does not meet the applicable statutory filing requirements, this date will not be active date on the Department of State's records.  Es a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day at 08 JANUARY  2020  Signature of a member or authorized representative of a member

Filing Fee: \$25.00