#206000101164

(Req	uestor's Name)		
(Addi	ress)	<u>.</u>	
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(City/	/State/Zip/Phone	e #)	
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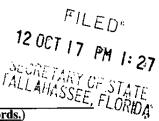
SECRETARY OF STATE
ALLAHASSEE, FLORDA

OCT 18 5015 EXAMINER K.SALY

COVER LETTER

Divis	ion of Corporations				
SUBJECT: _		Skyscra	per Holding LLC		
SOBJECT: _			nited Liability Company		
The enclosed .	Articles of Amendment	and fee(s) are s	ubmitted for filing.		
Please return a	all correspondence conce	erning this matt	er to the following:		
	···		Rey Badal		
			Name of Person		
		ı	Badal Investments li	nc.	
			Firm/Company		
			9472 NW 49th Lan	е	
			Address		
			Doral , Florida 3317	78	
			City/State and Zip Code		
		ron@	blueribbonblossom (to be used for future annual	report notificati	on)
For further inf	ormation concerning th			,	,
	Rey Badal		at (786)	39	3-3386
	Name of Person			e & Daytime Te	lephone Number
Enclosed is a	check for the following	amount:			
✓ \$25.00 Fili	ng Fee \$30.00 Certi	Filing Fee & Cicate of Status	\$55.00 Filing Fee of Certified Copy (additional copy		\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	MAILING ADDRI Registration Section Division of Corpora P.O. Box 6327 Tallahassee, FL 323	tions	Registra Division Clifton 2661 Ex	T/COURIER ation Section of Corporation Building recutive Center see, FL-32301	ons r Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



SI	kyscraper Holding LLC		ASSEE, FLORIDA"
(<u>Name of the Limited I</u> (A I	Liability Company as it now appear: Florida Limited Liability Company)	s on our records.)	TO NO A
The Articles of Organization for this Limited Lia	bility Company were filed on	10/17/2006	and assigned
Florida document numberL060001011			
This amendment is submitted to amend the follow	wing:		
A. If amending name, enter the new name of	the limited liability company here	2 :	
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Compar	ny," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applica	ble:		
(Principal office address MUST BE A STREET	ADDRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE B	<u> </u>		
B. If amending the registered agent and/or registered agent and/or the new registered offi		ur records, <u>enter t</u>	he name of the new
Name of New Registered Agent:			
New Registered Office Address:	Fnt	er Florida street add	ress
	Litt		. 000
	City	, Florida	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 608, 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 Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	JDM Premier Investments	255 NW 45th Ave Miami, Florida 33126	Add Remove
MGRM	Paterson Investment Group	11443 SW 109th Road Suite C Miami, Florida 33126	
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amend	ing any other information, enter change	e(s) here: (Attach additional sheets, if necessary.)	
			
			_
Dated	October 15 , 20°	12 2 2	_
	Signature of a member	or authorized representative of a member	
	Typed	Rey Badal or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00