## L09000023974

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PICK-UP	WAIT	MAIL
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Certified Copies	Certificates o	of Status
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Special Instructions to	Filing Officer:	
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## **COVER LETTER**

Tallahassee, FL 32314

	Registration So Division of Cor		•		· ·		
SUBJEC*	Sky Consul	t Itants Realty & Property Manag	gement LLC	•			
SUBJEC	1	Name of Lim	ited Liability Company		<del></del>		
The enclos	sed Articles of	Amendment and fee(s) are sub	mitted for filing.				
		ondence concerning this matter	-				
		Sherlyn Arauma				tus &	
			Name of Person				
		Sky Consultants Realty &	Property Management LLC	С			
			Firm/Company	<del></del>			
		3415 W Lake Mary Blvd #	954071				
			Address				
		Lake Mary FL 32795-4071					
		<u> </u>	City/State and Zip Code	·-			
		skyconsultantsllc@hotmail.					
			to be used for future annual re	eport notificat	tion)		
For furthe	r information c	oncerning this matter, please co	all:				
Sherlyn Arauma			386 386- at ( )	-801-3859			
	Name o	f Person	Area Code	Daytime To	elephone Number	atus &	
Enclosed i	is a check for th	he following amount:					
□ \$25.0¢	0 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclo		☐ \$60.00 Filing Fee, Certificate of Stat Certified Copy (additional copy is en	tus &	
	Aniling Addres		Street Ado				
Registration Section Division of Corporations			Registration Section Division of Corporations				
	O. Box 632	•	The Centre of Tallahassee				

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Sky Consultants Realty & Property Management LLC

( <u>Name of the Limited Liability</u> (A Florida	Y Company as it now appears on our records.) Limited Liability Company)
The Articles of Organization for this Limited Liability Co Florida document number L09000023974	*
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limit	ed liability company here:
The new name must be distinguishable and contain the words "Limit	ted Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	Same
(Principal office address MUST BE A STREET ADDRI	ESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	Same
B. It amending the registered agent and/or registered agent and/or the new registered office address here:  Name of New Registered Agent:	office address on our records, enter the name of the new registered
New Registered Office Address:	
New Negistered Office Address.	Enter Florida street address Florida
	City Zipt Sode  Agent:  and agree to act in this capacity. I further agree to comply with the
New Registered Agent's Signature, if changing Registered	Agent:
provisions of all statutes relative to the proper and co accept the obligations of my position as registered ag	ind agree to act in this capacity. I further agree to comply with the implete performance of my duties, and I am familiar with and ent as provided for in Chapter 605, F.S. Or, if this document is d office address, I hereby confirm that the limited liability
	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
MGR	JOMAR BONANO LOPEZ	3415 W LAKE MARY BLVD #954071	□Add
		LAKE MARY FL 32795-4071	<b>≡</b> Remove
			□ Change
MGR	SHERLYN ARAUMA	3415 W LAKE MARY BLVD #954071	<b>=</b> Add
		LAKE MARY FL 32795-4071	□Remove
<del></del>			□Add
			□Remove
		<del></del>	Change
			□Add
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ecord specis filed.	cifies a delaye	d effective date	e, but not an c	effective time	e, at 12:01 a.n	n, on the ear	rlier of: (b)	The 90th day	after the
ted NOV	EMBER 19		20	)21					
_		Sign	utire of a mem	ber or authori	Ad representat	ive of a mem	ber		_
		RAUMA	•		-				