

L09000046650

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10 FEB 18 PM 1:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

S. HAWKES
FEB 19 2010
EXAMINER

S. HAWKES
FEB 15 2010
EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 15, 2010

LIOR AZULAY
1930 NE 211 TERRACE
MIAMI, FL 33179

SUBJECT: BTERMI LLC
Ref. Number: L09000046650

We have received your document for BTERMI LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6955.

Suzanne Hawkes
Regulatory Specialist II

Letter Number: 110A00003744

Sky Moving and Storage, LLC

1930 NE 211 Terrace

Miami, FL 33179

02/09/10

To whom it may concern,

Please find below is the information as you requested.

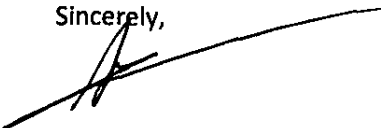
Sky Moving and Storage, LLC

1930 NE 211 Terrace

Miami, FL 33179

The day time phone number is 305-300-5790

Sincerely,

A handwritten signature in black ink, appearing to be 'Lior Azulay', written over a horizontal line.

Lior Azulay

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: _____
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:

LIOR AZULAY

Name of Person

SKY MOVING LLC

Firm/Company

1930 NE 211 TERRACE

Address

MIAMI, FL 33179

City/State and Zip Code

INFO@SKYMOVINGANDSTORAGE.COM

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

For further information concerning this matter, please call:

LIOR AZULAY

Name of Person

at (**305**)

300-5790

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

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

BTERMI LLC

(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 05/13/2009 and assigned Florida document number L09000046650

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

SKY MOVING LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

New Registered Office Address:

Enter Florida street address

_____, Florida _____

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 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

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TALLAHASSEE, FLORIDA

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>	<u>Address</u>	<u>Type of Action</u>
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_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
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 TALLAHASSEE, FLORIDA

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

Dated FEBRUARY 19th, 2010

Signature of a member or authorized representative of a member

LIGR AZULAY

Typed or printed name of signee