L1000012392D

Office Use Only



100207635031

05/23/11--01015--028 **25.00

11 MAY 23 AH IO: 26

B. BOSTICK
MAY 2 4 2011
EXAMINER

COVER LETTER

Division of Corporations
SUBJECT: Sky Scapes Marketing, UC 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:
Tanny M. Darby Name of Person Skyscapes Marketing Firm/Company 4038 Ananda Lane
Middleburg FL 32068
City/State and ZipCode tannie@bellsouth.net E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Tanny Parloy at (904) 673-4922 Area Code & Daytime Telephone Number From State Code & Daytime Telephone Numbe
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Certificate of Status} \text{S55.00 Filing Fee & Certified Copy (additional copy is enclosed)} \$\ \text{Certified Copy (additional copy is enclosed)} \text{\$\ \text{Certified Copy (additional copy is enclosed)}} \$\

' TO:

Registration Section

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

Sky Scapes 1	Marketing	LLC		
(Name of the Limited Liabilit (A Florida	y Company as it now d Limited Liability Comp	phears on our records. any)	1	
The Articles of Organization for this Limited Liability (Florida document number L\0000\239a)		Dec. 1, 201	and assigned	
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the lim	nited liability compan	<u>y here</u> :		
Skyscapes Enfloyer The new name must be distinguishable and end with the work.L.L.C."	ords "Limited Liability C	Company," the designation	n "LLC" or the abbreviat	ioi
Enter new principal offices address, if applicable:			1	
(Principal office address MUST BE A STREET ADD	RESS)			_
				_
Enter new mailing address, if applicable:		MARKET TO ARTER TO		_
Mailing address MAY BE A POST OFFICE BOX)	•		- L S D O	_
		· · · · · · · · · · · · · · · · · · ·	25 25 25 25 E	_
B. If amending the registered agent and/or registered agent and/or the new registered office add		on our records, ent	er the name of the no	:N
Name of New Registered Agent:			<u></u>	-
New Registered Office Address:		y-1 2-1 2	7.7	
		Enter Florida street	address	
	Cia.	, Florida	Zip Code	
	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

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 = M MGRM =	anager Managing Member		,
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
	,		AddRemove
			Add Add Remove;
			Add Remove
D. If amen	nding any other information, enter chan	ge(s) here: (Attach additional sheets, if necessa	(Ty.)
	Please list EIN	V information (EIN no	umber)
<u></u>	for frame intorna	tobn on FL Deportment rations website - wi	to g State
r	my company same	is pulled up al would	ldlike
4		o see that I have an	EIN number
Dated	18 May , 2	eyor authorized representative of a member	
	Tank	ny M. Darby ed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00