

L1000012392D

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

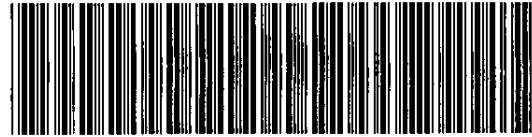
(Business Entity Name)

(Document Number)

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11 MAY 23 AM 10:26  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

B. BOSTICK

MAY 24 2011

EXAMINER

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Skyscapes Marketing, LLC  
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:

Tammy M. Darby  
Name of Person

Skyscapes Marketing  
Firm/Company

4038 Amanda Lane  
Address

Middleburg FL 32068  
City/State and Zip Code

tamrie@bellsouth.net  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tammy Darby at (904) 673-4922  
Name of Person Area Code & Daytime Telephone Number

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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

Skyscapes Marketing, 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 Dec. 1, 2010 and assigned Florida document number L10000123920.

This amendment is submitted to amend the following:

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

Skyscapes Enterprises, LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or 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)

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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

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>
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
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_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove

SECURITY  
 TALLAHASSEE  
 STATE  
 23  
 26

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

Please list EIN information (EIN number)  
for filing information on FL Department of State  
Division of Corporations Website — when  
my company name is pulled up, I would like  
people to be able to see that I have an EIN number.

Dated 18 May, 2011.

Tammy M. Darby  
 Signature of a member or authorized representative of a member  
Tammy M. Darby  
 Typed or printed name of signee