Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : FRANK GUTTA CPA PA

Account Number : 119990000055 Phone : (954) 452-8813

Fax Number

: (954)452-8359

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SK OPERATORS LLC

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Corporate Filing Menu

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JUL 1 6 2013

T. HAMPTON

7/15/2013

https://efile.sunbiz.org/scripts/efilcovr.exe

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SK Operators, LLC		
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.) ability Company)	
The Articles of Organization for this Limited Liability Company	were filed on 4/1/13	_and assigned
Florida document number L13000047405		
- 101100 Goodinan Homool		JUL JON O
This amendment is submitted to amend the following:		75 CG
A. If amending name, enter the new name of the limited liabil	lity company here:	SION OF CORPORATE
The new name must be distinguishable and end with the words "Limite "L.L.C."	ed Liability Company," the designation "LLC	2" or the abbreviation
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 off registered agent and/or the new registered office address here	ice address on our records, enter the	name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addre	3.2
	, Florida	
	City .	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agre the provisions of all statutes relative to the proper and compl accept the obligations of my position as registered agent as n	lete performance of my duties, and I am	familiar with and

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.

No. 3082 P. 3

Remove

MGR = Manager

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:

MGRM = Managing Member <u>Title</u> Name <u>Address</u> Type of Action Frank Gutta **MGRM** 490 Sawgrass Corp Pkwy Suite 310 Remove Sunrise, FL 33325 Remove

f amending any other inform	nation, enter change(s) here: (Attach additional sheets, if necessary.)
Lub. 45	2012
ted July 15	
	A CONTRACTOR OF THE PARTY OF TH
S	Signature of a member or authorized representative of a member
Frank Gutta	
 -	Typed or printed name of signee
	Page 3 of 3

Page 3 of 3

Filing Fee: \$25.00

13 JUL 15 AM 7:30