L14000000 405

,				
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(Address)				
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COVER LETTER

TO: Registration S Division of Co	
SKYTOU SUBJECT:	IR, LLC
50b0EC1.	Name of Limited Liability Company
The enclosed Articles o	f Amendment and fee(s) are submitted for filing.
Please return all corresp	condence concerning this matter to the following:
	Christopher J. Creegan
	Name of Person
	Creegan Property Group
	Firm/Company
	439 Lake Howell Road
	Address
	Maitland, FL 32751
	City/State and Zip Code
	chris@creegangroup.com
For further information	E-mail address: (to be used for future annual report notification) concerning this matter, please call:
Chris Creegan	407 509-2159
	of Person Area Code Daytime Telephone Number
Enclosed is a check for	the following amount:
\$25.00 Filing Fee	□ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) 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

SKYTOUR, LLC		
(<u>Name of the Limited Liability C</u> (A Florida Lin	Company as it now appears on our records.) mited Liability Company)	
The Articles of Organization for this Limited Liability Com Florida document number L14000000405	npany were filed on 01/02/2014	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	d liability company here:	
CREEGAN PROPERTIES, LLC		
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES	(92	<u> </u>
11 The span office anaress most be northern montes		
		- 第 5年 - 第5年
T		70 20 Cal
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		2: 3: 3: 3: 3: 3: 3: 3: 3: 3: 3: 3: 3: 3:
		<u>8</u> 3
B. If amending the registered agent and/or registered registered agent and/or the new registered office address Name of New Registered Agent:		e name of the new
New Registered Office Address:		
Now Registered Office Madregs.	Enter Florida street address	
	, Florida	
		Zip Code
New Registered Agent's Signature, if changing Registered A	gent:	
I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and compaccept the obligations of my position as registered agen being filed to merely reflect a change in the registered of company has been notified in writing of this change.	plete performance of my duties, and I am fam at as provided for in Chapter 605, F.S. Or, if t	iliar with and his document is
Ī	f Changing Registered Agent, Signature of New Regist	ered Agent

Page 1 of 3

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 = N AMBR = A	Manager Authorized Member		
<u>Title</u>	Name	Address	Type of Action
			Add
			□ Remove
			□ Change
			□ Remove
			Change
			□ Add
			Remove
		/	☐ Change
	/		D Add
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			Change
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lote: If the date inserted in this	he date of filing: nust be specific and cannot be prior to date of filing or more than 90 block does not meet the applicable statutory filing requiren Department of State's records.	(optional) O days after filing.) Pursuant to 605.0207 ments, this date will not be listed as
e record specifies a delay The 90th day after the r	ed effective date, but not an effective time, at ecord is filed.	12:01 a.m. on the earlier of
ated	2016	
	Signature of a member or authorized representative of a memb	<u>ත්</u> ද per පු ?? C පු
Chim-hI C		13CT 13C
Christopher J. Creeg	Typed or printed name of signee	
		PH (2)
	Page 3 of 3	₩

Filing Fee: \$25.00