(Re	questor's Name)	
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SECRETARY OF STATE

NOV 23 2015 S. YOUNG



November 10, 2015

LORI WOLFE 2180 WEST FIRST STREET STE 302 FORT MYERS, FL 33901

SUBJECT: SOARING SKY PHOTOS, LLC

Ref. Number: L14000024983

We have received your document for SOARING SKY PHOTOS, 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.

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) 245-6051.

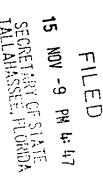
Shelia H Young Regulatory Specialist II

Letter Number: 215A00023827

Dear Shelia,

The reason the name change was rejected was because it was similar to an existing entity. The documentation you provided indicates that this entity is actually the trademark we filed for company. I have called your office and they have instructed me to type a letter stating the trademark belongs to us. We would still like to proceed with changing our name to Soaring Sky, LLC. If there are any questions please feel free to contact me at 239-333-2447.

Thank you, Lori Wolfe



COVER LETTER

Div	ision of Corp	oorations			
SUBJECT:	SOARING S	SKY PHOTOS, LLC			
SCBGLC1.		Name of Lim	ited Liability Company		
The enclosed	Articles of A	Amendment and fee(s) are sub-	mitted for filing.		
Please return	all correspor	idence concerning this matter	to the following:		
		LORI WOLFE		•	
			Name of Person ,	<u>·</u>	·
		SOARING SKY PHOTOS	S, LLC	,	
			Firm/Company		
		2180 West First Street Suit	te 302		SE 5
			Address		弱真工
		Fort Myers, FL 33901			N-9 P
		LODIO AGODTO AGO	City/State and Zip Code		
		LORI@ASSETQUEST.CO E-mail address: (1)	M to be used for future annual report notific	cation)	1000 FE
For further in	nformation co	ncerning this matter, please ca	•	•	景市与
LORI WOL	FE		239 541-8448 at ()		
	Name of	Person		Telephone Number	
Enclosed is a	check for the	e following amount:			
■ \$25.00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified (e of Status &

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

SOARING SKY PHOTOS, 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 $\frac{2-12-2014}{1}$ and assigned Florida document number L14000024983 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: SOARING SKY, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 2180 West First Street Enter new principal offices address, if applicable: Suite 302 (Principal office address MUST BE A STREET ADDRESS) Fort Myers, FL 33901 2180 West First Street Enter new mailing address, if applicable: Suite 302 (Mailing address MAY BE A POST OFFICE BOX) Fort Myers, FL 33901 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

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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = M $AMBR = A$	lanager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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			☐ Remove
	·		□ Change
			□ Add
			Remove
			□ Change
			C Prove
		-	ASSOCIATION DE LA CONTRACTOR DE LA CONTR
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Filing Fee: \$25.00