## L140000 25067

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



800349705278

08/10/20--01037--605 \*\*25.09

Ancend

SEPUSITION

## **COVER LETTER**

TO: Registration So Division of Cor			
SUBJECT:	Skypont Ho Name of Lin	Idings LCC nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
		Name of Person  Schmidt  Firm/Company	_
	4055	CENTIAL AVE	
		City/State and Zip Code  Coats - Schmic to be used for future annual report noti	
For further information of	E-mail address: (concerning this matter, please c	•	fication)
		at (727) 456- Area Code Daytime	YY62 e Telephone Number
Enclosed is a check for t	he 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)
		0	

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CKYDOAT HOLDTAKE 111

(Name of the Limited Liability Comp. (A Florida Limited	pany as it now appears on our records.) d Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L/400025067</u>	ny were filed on FEbruary 12,2014 and assigned	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liah	ability company here:	
N/A		
The new name must be distinguishable and contain the words "Limited Liabi	bility 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)	6530 Tampa Executive Airport Re Tampa, FL 33610	iN)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	6530 TAMPA Exécutivé Aignort Rua TAMPA, EL 33610	_
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	e address on our records, <u>enter the name of the new regis</u> t	<u>tered</u>
Name of New Registered Agent:	N/A	_
New Registered Office Address:	Enter Florida street address	<b></b> -
	, Florida City Zip Code	_
Name Danistanus de Casastanus if alcamatica Danistanus de Casastanus	•.	

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

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
			□Add
			Remove
			Change
		/	
			□Remove
		1/4	□Change
		/	□Add
		<del></del>	□Remove
		<i></i>	Change
			□Remove
			□ Change
			□Remove
			□Change
	/		□ Add
			□Remove
			□Chance

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
<u> </u>
E. Effective date, if other than the date of filing:  (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3):  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.
Dated August 6, 2020.  Signature of a member or authorized representative of a member
RAJEJA TA/A Typed or printed name of signee