L14000047223

(Re	equestor's Name)	
(Âc	ldress)	
(Ac	idress)	
(Cit	ty/State/Zip/Phone #)
PICK-UP	WAIT	MAIL
(Ви	siness Entity Name)
(Do	ocument Number)	
Certified Copies	Certificates o	f Status
Special Instructions to	Filing Officer:	
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COVER LETTER

	egistration Sect livision of Corpo			
SUBJECT	SKY INVEST	Γ & TRADE, LLC		
SUBJEC	·	Name of Limi	ited Liability Company	
		mendment and fee(s) are sub-	-	
		KIMBERLY MARENCO		
			Name of Person	
		DIFALCO & FERNANDE	Z, LLLP	
			Firm/Company	
		777 BRICKELL AVENUE	E, SUITE 630	
			Address	
		MIAMI, FL 33131		
			City/State and Zip Code	
		KMARENCO@DIFALCOF		
		E-mail address: (t	to be used for future annual report noti	fication)
For further	r information con	cerning this matter, please ca	il:	
KIMBERI	LY MARENCO		305 569-9800 at ()	
	Name of P	erson		e Telephone Number
Enclosed i	s 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:

TO:

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



December 22, 2015

KIMBERLY MARENCO 777 BRICKELL AVENUE, SUITE 630 MIAMI, FL 33131

SUBJECT: SKY INVEST & TRADE, LLC

Ref. Number: L14000047223

We have received your document for SKY INVEST & TRADE, 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 registered agent must sign accepting the designation.

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.

Jenna D Harris Regulatory Specialist II

Letter Number: 315A00026745

SECRETABLE OF STATE SECRETABLE FLORIDA

2015 DEC 31 PK 12: 24

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SKY INVEST & TRADE, LLC			
(Name of the Lim	ited Liability Compar (A Florida Limited L	ny as it now appears on our records.) iability Company)	
The Articles of Organization for this Limited I	Liability Company	were filed on March 21, 2014	and assigned
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name	of the limited liabi	lity company here:	
The new name must be distinguishable and contain the	words "Limited Liabili	ty Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:		
Principal office address MUST BE A STRE	ET ADDRESS)		
			1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
Enter new mailing address, if applicable:			TC TO 177
Mailing address MAY BE A POST OFFICE	E BOX)		<u> </u>
			81 N
			ا حزا
B. If amending the registered agent and registered agent and/or the new registered of			nter the name of the new
Name of New Registered Agent:	DiFalco & Ferna	andez, LLLP	
New Registered Office Address:	777 Brickell Av	enue, Suite 630	
	-	Enter Florida street address	
	Miami	Floric	la 33131

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

'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 $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			☐ Remove
			☐ Change
			Remove
			Change
		<u> </u>	Add
			□ Remove
			Change
			Add Co
			□ Remove
			Change 22
			Add
			Remove
			Change
			□ Remove
			Change.

ock does not meet the applicable statute partment of State's records.	ory filling requirements, this date will not be	listed as the
date of filling:	(optional) ling or more than 90 days after filing.) Pursuant to	605.0207 (3)
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	date of filling: the specific and cannot be prior to date of finck does not meet the applicable statut	date of filing: (optional) to specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to ack does not meet the applicable statutory filing requirements, this date with not be

Page 3 of 3

Filing Fee: \$25:00