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## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)61.7-6383

Account Name : GUZMAN & GUZMAN, P.A.

Account Number : 120080000090

Phone : (305) 670-1997.

: (305)670-1993

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

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **FUTURE SKIES LLC** 

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Corporate Filing Menu

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FUTURE SKIES LLC					
(Name of the Limited Liability Co. (A Florida Limit	npany as it now app ed Liability Compan	ocars on our records.) y)			
The Articles of Organization for this Limited Liability Compa	any were filed on	05/29/2014	<del></del> -	and as	signed
Florida document number L1400086508					
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited I	iability company	here:			
The new name must be distinguishable and end with 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 ADDRESS	)			<u> 5</u>	
			<u> </u>	<u> </u>	
			SS	-9	i ur uetr
Enter new mailing address, if applicable:		<u></u>	<u></u>	To	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)				ik —	T F (
			<u> </u>	_cr_	
			10.7 3.1	₩)	
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		on our records,	enter the	name	of the ne
Name of New Registered Agent:					
New Registered Office Address:					
	Enter	Florida street address	<del></del> :		
		, Flor	id <b>a</b>		
	City		Ž	Zip Code	
New Registered Agent's Signature, if changing Registered Age	int:				
New Registered Agent's Signature, if changing Registered Age	ent:		Ž	Cip Code	

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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member

3056701993

Title	<u>Name</u>	<u>Address</u>	Type of Action
MGR	DOMENECH, MARIA E	2750 NE 185 STREET SUITE 202	🗆 Add
		AVENTURA, FL 33180	■ Remove
MGR	G&G Management US IIc	9130 S DADELAND BLVD	■ Add
		STE 1509	□ Remove
		MIAMI FL, 33156	
		TALLAHASSEE JURIDA	Remove 9
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