

L15 000063630

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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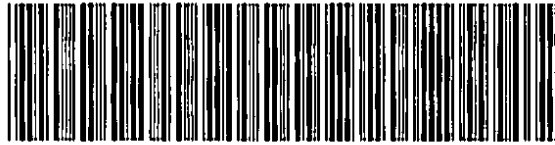
(Business Entity Name)

(Document Number)

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2/18/21

1800 W BROWARD BLVD
FORT LAUDERDALE, FL 33312

SKY 230.COM LLC

1800 W BROWARD BLVD
Fort Lauderdale, Florida 33312

PHONE - 954-524-9999

TO WHOM IT MAY CONCERN

THIS IS TO VERIFY THE RETURN ADDRESS FOR THE CONTENT OF THIS PACKAGE IS 1800 W BROWARD BLVD., FORT LAUDERDALE, FLORIDA, 33312.

IF YOU HAVE ANY QUESTIONS PLEASE CONTACT AT 954-524-9999.



GORAN DRAGOSLAVIC



Guy Thomas Strenpack, P.A.

Attorney and Counselor at Law

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SKY230.COM, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Guy Strempack, Esq

Name of Person

Strempack Law

Firm/Company

1800 West Broward Blvd. Suite 101

Address

Ft. Lauderdale, FL 33312

City/State and Zip Code

guy@strempacklaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Guy Strempack, Esq

954

459-3864

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is 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:

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

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

SKY230.COM, 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 04/10/2015 and assigned
Florida document number L15000063630.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability 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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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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

_____, Florida _____
City Zip Code

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 = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	GITLIN, DANIEL	730 NE 7TH AVENUE	<input type="checkbox"/> Add
		FORT LAUDERDALE, FL 33304	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Sagdeev, Andrei	1830 WEST BROWARD BLVD.	<input checked="" type="checkbox"/> Add
		FORT LAUDERDALE, FL 33312	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
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			<input type="checkbox"/> Change

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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.

Dated January 9, 2021

GORAN DRAGOSLAVIC
Typed or printed name of signee

Filing Fee: \$25.00