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(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Statu	s
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04/26/18--01020--023 **25.00

Effective: 05/01/2018

SECRETARY OF STATE TALLAHASSEE. FLORIDA

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COVER LETTER

TO:	Registration Sec Division of Corp			
czin I)	Skylight LL	С		
SUBJ	EC1:	Name of Limi	ted Liability Company	
The er	aclosed Articles of A	Amendment and fee(s) are subr	mitted for filing.	
Please	return all correspon	ndence concerning this matter t	to the following:	
		Emiliano Ballanti		
			Name of Person	
		Skylight LLC		
			Firm/Company	
		2003 West Cypress Creek I	Rd. Suite 104	
			Address	
		Ft. Lauderdale, FL 33309		
			City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·
		vgethicalsolutions@gmail.co		
		E-mail address: (t	to be used for future annual report notification	ation)
For fu	rther information co	oncerning this matter, please ca	all:	
Maria	Cantero		786 703-4987 at ()	
	Name of	f Person	Area Code Daytime T	Celephone Number
Enclo	sed is a check for th	ne following amount:		
\$2	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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Skylight LLC			
(Name of the Limited Liability Compa (A Florida Limited)	ny <u>as it now appears on our records.)</u> Liability Company)	-	
The Articles of Organization for this Limited Liability Company Florida document number L15000099328	were filed on 06/08/2015	and assigne	:d
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbr	eviation "L.L.C."	Z S
Enter new principal offices address, if applicable:	2003 West Cypress Creek Rd Suite 104		LLA ECRI
(Principal office address MUST BE A STREET ADDRESS)	Ft. Lauderdale, FL 33309	ガン	HANT.
		 _	THE THE
Enter new mailing address, if applicable:	2003 West Cypress Creek Rd Suite 104	PH 3:5	FSTAT
(Mailing address MAY BE A POST OFFICE BOX)	Ft. Lauderdale, FL 33309		<u> </u>
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her		ne name of t	the new
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street address		
	, Florida		
	City , Florida	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>	Address	Type of Action
MGR	Ivan Bustamante	10482 NW 31 Ter	
		Miami, FL 33172	Remove
			Change
MGR	Maria Cantero	2003 West Cypress Creek Rd Suite	
,		Ft. Lauderdale, FL 33309	Remove
			Change
			Remove
			Change
			☐ Remove
			Change
			Add
			□ Remove
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			Remove
			□ Change

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rective date, if other than an effective date is listed, the date ite: If the date inserted in this cument's effective date on the	must be specific and s block does not m	cannot be prior to d neet the applicable	ate of filing or more statutory filing	(option e than 90 days after frequirements, this	iling.) Pursuant to	605,0207 listed as
record specifies a dela The 90th day after the i	yed effective d ecord is filed.	ate, but not a	n effective tir	ne, at 12:01 a.	m. on the ea	rlier of
ted April 20th		2018				
		22				

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Typed or printed name of signee

Filing Fee: \$25.00