## 15000146252

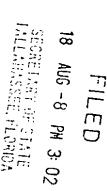
(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

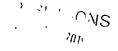
Office Use Only



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## **COVER LETTER**

TO: Registration Division of C			
SkyBlue SUBJECT:	Jet Management LLC		
SUBJECT.	Name of Lim	ited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub	mitted for filing.	
Please return all corres	pondence concerning this matter	to the following:	
	Tomas Bueno		
		Name of Person	
	SkyBlue Jet Manageme	nt LLC	
		Firm/Company	
	2315 SE Witham Field [	)r	
	<del></del>	Address	<del>-</del>
	Stuart, FL 34996		
		City/State and Zip Code	
	marla@skyblueja.com		<del> </del>
	E-mail address: (	to be used for future annual report notif	ication)
For further information	concerning this matter, please c	all:	
Marla Bueno		772 781-3903	
Name	e of Person	at () Area Code Daytime	: Telephone Number
Enclosed is a check for	r 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/COURIER ADDRESS:

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SkyBlue Jet Management 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  $\frac{8/26/2015}{2}$ and assigned Florida document number <u>L15000</u>146252 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" of 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: (Muiling address MAY BE A POST OFFICE BOX) 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

## 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>	Type of Action
MGR	Tomas Bueno	15710 Chandelle PI	Add
		Wellington, FL 33414	Remove
			Change
MGR	SkyBlue Jet Aviation LLC	2315 SE Witham Field Dr	<b>=</b> Add
		Stuart, FL 34996	Remove
		<u> </u>	Change
			Add
			Remove SS O
			S. Oston
			□ Remove
			Change
			Add
			□ Remove
		<del></del>	□ Change
	<del></del>		Add
			□ Remove
			☐ Change

Please replace Tomas Br	ueno with SkyBlue Jet Av	ation LLC	
<del></del>			
<del></del>		-	
			<u>.</u>
	***		
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fective date, if other than th	e date of filing:		(optional) un 90 days after filing.) Pursuant to 605.0207 (
on effective date is listed, the date more.  If the date inserted in this locument's effective date on the locument.	block does not meet the appl	icable statutory filing requ	un 90 days after tiling.) Pursuant to 605.0207 (. iirements, this date will not be listed as tl
record specifies a delaye The 90th day after the re		not an effective time,	at 12:01 a.m. on the earlier of:
August 3	2018		
ned	· · ·	<u></u> .	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00