

L16 0000 53519

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

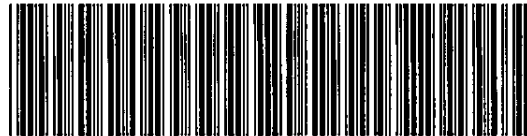
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S Warren

AUG 08 2016

WEISS, HANDLER & CORNWELL, P.A.

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MARITAL & FAMILY LAW

JOSEPH ABRUZZO
GOVERNMENT RELATIONS
& PUBLIC POLICY
NOT ADMITTED TO FL BAR

August 3, 2016

VIA U.S. MAIL

Stacey M. Warren
Regulatory Specialist II
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Skilyne Capital Group, LLC
Ref. Number: L16000053519

Dear Ms. Warren:

Enclosed please find the Articles of Amendment to Articles of Organization of Skilyne Capital Group, LLC which have been signed by Jefferson Moore the Manager for filing. Also enclosed is a copy of your deficiency letter dated July 14, 2016 which notes that the filing fee is being held by your office. Should you have any question, please do not hesitate to contact the office. Thank you.

Very truly yours,

WEISS, HANDLER & CORNWELL, P.A.



HENRY B. HANDLER

HBH/jdn
Enclosure
cc via email: Client



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 14, 2016

HARRY WINDERMAN
WEISS HANDLER & CORNWELL P.A.
2255 GLADES ROAD, SUITE 218A
BOCA RATON, FL 33431

SUBJECT: SKILYNE CAPITAL GROUP LLC
Ref. Number: L16000053519

We have received your document for SKILYNE CAPITAL GROUP 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 document must be signed by a member or an authorized representative of a member.

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.

Stacey M Warren
Regulatory Specialist II

Letter Number: 116A00014759

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SKILYNE CAPITAL GROUP 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:

HARRY WINDERMAN

Name of Person

WEISS HANDLER & CORNWELL P.A.

Firm/Company

2255 GLADES ROAD, SUITE 218A

Address

BOCA RATON, FL 33431

City/State and Zip Code

HW@whcfla.com

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

For further information concerning this matter, please call:

HARRY WINDERMAN

Name of Person

at (561) 997-9995

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/COURIER ADDRESS:

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

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

SKILYNE CAPITAL GROUP 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 3-15-16 and assigned
Florida document number 116000053519

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)

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:

JEFFERSON D. MOORE

New Registered Office Address:

SAME ADDRESS 8000 N. Federal Hwy #300
Enter Florida street address

BOCA RATON, Florida 33483
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.

Harry Winderman SAME

AUTHORIZATION BY PHONE TO

CORRECT remove extra R.A.

DATE 8/8/16

DOC. EXAM SHARREN

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.	Jefferson Moore	8000 N. Federal Hwy	<input checked="" type="checkbox"/> Add
		POCA BAY, FL 33483	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
Mgr.	Curtis Brown	8000 N. Fed. Hwy	<input checked="" type="checkbox"/> Add
		POCA BAY, FL 33483	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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 FLORIDA
 2016-06-03 P 10 41

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

[illegible]

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated: July 22nd 2016.

Signature of a member or authorized representative of a member

JERRESON MOORE

Typed or printed name of signer

2012-06-05 P 4:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED