(D.	NI N		
(Requestor's Name)			
(Ad	ldress)		
(Ad	ldress)		
(Cir	ty/State/Zip/Phone	#)	
	•		
PICK-UP	WAIT	MAIL	
(D.	siness Entity Nam	(a)	
(60	isiness Entity Nam	(c)	
(Do	ocument Number)		
Certified Copies	_ Certificates	of Status	
Special Instructions to	Filing Officer		
opeoidi modudosono to	Timing Cilicon		

Office Use Only



700295286797

03/22/17--01018--007 **25.00

COVER LETTER

والماكي يتطاف أيطاف

	ivision of Corp				
SUBJECT		CLEAR FLORIDA, LLC			
		Name of Limited Liability Company			
The enclos	ed Articles of A	Amendment and fee(s) are submitted for filing.			
Please retu	rn all correspon	dence concerning this matter to the following:			
		ALEJANDRA C DIAZ			
		Name of Person			
		SKY CLEAR FLORIDA LLC			
		Firm/Company			
		205 NW 11TH AVE APT 4			
		Address			
		FORT LAUDERDALE, FL 33311			
		City/State and Zip Code			
		help.skyclear@gmail.com E-mail address: (to be used for future annual report notification)			
For further	information co	ncerning this matter, please call:			
ALEJAND	RA C DIAZ	305 879-4354			
	Name of	at ()			
	Name of	rerson Area Code Daytime Telephone Number			

MAILING ADDRESS:

Certificate of Status

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Certificate of Status & -

Certified Copy (additional copy is enclosed)

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

Certified Copy (additional copy is enclosed)

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

SKY CLEAR FLORIDA, LLC		
(Name of the Limited Liability Compa (A Florida Limited	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L17000013993	were filed on 01/18/2017	and assigned
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 Liabil	ity Company," the designation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
		3 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
Enter new mailing address, if applicable:	3460 SW 15TH STREET	新 新 R 22
(Mailing address MAY BE A POST OFFICE BOX)	FORT LAUDERDALE, FL 33312	390
_		
		39
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		the name of the
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, 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	ALEJANDRA C DIAZ	205 NW 11TH AVE APT 4	= Add
		FT LAUDERDALE, FL 33311	□ Remove
			☐ Change
			Add
			□ Remove
			Change
			Add
		1500	Remove
			Change
			Add
			Remove
			17 Cange H 17 KRY
			FILED FARY OF SHIP 22 PM
	·		□ Remove
			Add
			□ Remove
			Change.

. If amer	nding any other information, o	nter change(s) here: (Attach additional sheets,	, if necessary.)
-			
_			
_			
			
_		<u> </u>	
_			
_			
_			
			- Albert Control
_			
_			
Note: I docume	f the date inserted in this block do nt's effective date on the Departm	tive date, but not an effective time, at 12	ents, this date will not be listed as the
Dated_	MARCH 18TH	2017	
_	Caylos	re of a member or authorized representative of a member	77 HA
	CARLOS R CERROS ABAI		MAR 22
		Typed or printed name of signee	P H 5000 000 000 000 000 000 000 000 000 0
		Page 3 of 3	RAILU RAILU

Filing Fee: \$25.00