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 Division of Corporations
 Florida Department of State
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To:
 Division of Corporations
 Fax Number : (850)617-6383

From:
 Account Name : PS KIS LLC
 Account Number : I202400001110
 Phone : (407)707-4914
 Fax Number : (407)337-8957

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

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DEPARTMENT OF STATE
 DIVISION OF CORPORATIONS
 TALLAHASSEE, FLORIDA

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SKYHOME CONSTRUCTIONS AND INVESTMENTS LLC

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K. SALY

DEC 18 2024

COVER LETTER

((H24000413407 3)))

TO: Registration Section
Division of Corporations

SUBJECT: SKYHOME CONSTRUCTIONS AND INVESTMENTS 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:

Marcus Paulo L. Segnini

Name of Person

PS KIS LLC

Firm/Company

5401 S KIRKMAN RD STE 560

Address

ORLANDO, FL 32819

City/State and Zip Code

contact@kiconsult.com

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

For further information concerning this matter, please call:

Marcus Paulo L. Segnini

407

707-4914

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

((H24000413407 3)))

SKYHOME CONSTRUCTIONS AND INVESTMENTS 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 08/25/2017 and assigned
Florida document number L17000182273

This amendment is submitted to amend the following:

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

SAMG Investments LLC

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: PS KIS LLC

New Registered Office Address: 5401 S KIRKMAN RD STE 560

Enter Florida street address

ORLANDO, Florida 32819

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.

Marcus Paulo Leitao Segnini

If Changing Registered Agent, Signature of New Registered Agent

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If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

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MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
ambr	Carlos Luiz Crispim P Junior	15124 LEMON PEEL ALY	<input type="checkbox"/> Add
		WINTER GARDEN, FL 34787	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
ambr	Maria Carolina C. F. L. Araujo	3400 E Fletcher Ave, apt 240	<input checked="" type="checkbox"/> Add
		Tampa, FL 33613	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

I would like to update the LLC with the following changes:

- 1- Remove Carlos Luiz Crispim P. Junior as a member of the LLC
- 2-Add Maria Carolina Carlos Freire Lacerda Araujo as the new member.
- 3-Change the name of the LLC to "SAMG Investments LLC."
- 4- Update the registered agent to "PS KIS LLC."

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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 December 16th, 2024

Sergio Lacerda De Araujo
Signature of a member or authorized representative of a member

SERGIO LACERDA DE ARAUJO

Typed or printed name of signee