

L19000 216 722

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

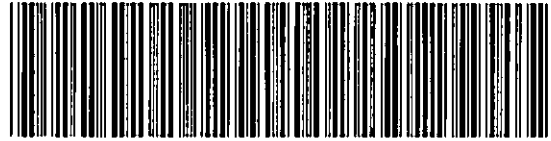
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FL

JAN 15 2020
C Kinsey

COVER LETTER

TO: **Registration Section
Division of Corporations**

SUBJECT: LUKE SKYBUILDER 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:

Luke Amoresano

Name of Person

LUKE SKYBUILDER LLC

Firm/Company

2550 NW 72nd Ave Ste 110

Address

Miami, FL 33122

City/State and Zip Code

luke@lukeskybuilder.com

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

For further information concerning this matter, please call:

Luke Amoresano

407

408-2323

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

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

LUKE SKYBUILDER 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 08/26/2019 and assigned
Florida document number L19000216722.

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)

2550 NW 72ND AVE

SUITE 110

MIAMI, FL 33122

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2550 NW 72ND AVE

SUITE 110

MIAMI, FL 33122

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TALLAHASSEE, FL

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:

2550 NW 72ND AVE SUITE 110

Enter Florida street address

MIAMI

City

Florida 33122

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>	<u>Address</u>	<u>Type of Action</u>
MGR	LUKE T AMORESANO	359 DE SOTO DR	<input type="checkbox"/> Add
		MIAMI SPRINGS, FL 33166	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	JEAN PAUL URQUIZO	2550 NW 72ND AVE	<input checked="" type="checkbox"/> Add
		SUITE 300	<input type="checkbox"/> Remove
		MIAMI, FL 33122	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change


[illegible]

(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)

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.

December 9, 2019



Signature of a member or authorized representative of a member

Luke Amoresano

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Filing Fee: \$25.00