

L20 0000487ZL

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

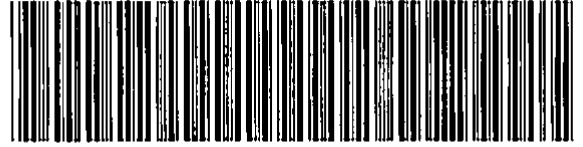
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SECRETARY OF STATE  
TALLAHASSEE, FL

LA  
1/12/21

# COVER LETTER

TO: **Registration Section**  
**Division of Corporations**

SUBJECT: SKYLA PETROLEUM 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:

ANDRES HURTADO

Name of Person

PRODEZK INC

Firm/Company

5040 NW 7TH ST SUITE 705

Address

MIAMI FLORIDA 33126

City/State and Zip Code

INFO@PRODEZK.COM

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

For further information concerning this matter, please call:

ANDRES HURTADO at ( 786 ) 2338521  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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**

SKYLA PETROLEUM 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 FEBRUARY 11, 2020 and assigned  
Florida document number L20000048726.

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:

New Registered Office Address:

*Enter Florida street address*

Florida

*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.*

**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          | EDISON WILLIAM MORALES CORDOVA | 5040 NW 7TH ST STE 705 MIAMI, FL 33126 | <input checked="" type="checkbox"/> Add    |
|              |                                |  | <input type="checkbox"/> Remove            |
|              |                                |  | <input type="checkbox"/> Change            |
| MGR          | EDISON O ORNA HERNANDEZ        | 5040 NW 7TH ST STE 705 MIAMI, FL 33126 | <input type="checkbox"/> Add               |
|              |                                |  | <input checked="" type="checkbox"/> Remove |
|              |                                |  | <input type="checkbox"/> Change            |
|              |                                |  | <input type="checkbox"/> Add               |
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|              |                                |  | <input type="checkbox"/> Add               |
|              |                                |  | <input type="checkbox"/> Remove            |
|              |                                |  | <input type="checkbox"/> Change            |

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There is no handwriting or other markings on the paper.

**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.

Dated November 25 2020

MARIA GABRIELA PROANO GUEVARA

Typed or printed name of signee