

L20000113677

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(Business Entity Name)

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Amend

JUN 24 2020

D CUSHING

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Haus of Skylan, 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:

Christina Nicole Patterson
Name of Person
Haus of Skylan, LLC
Firm/Company
10062 Stonehenge Circle Apt. 109
Address
Boynton Beach, FL 33437
City/State and Zip Code
hausofskylan@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Christina Nicole Patterson at (561) 344-0118
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

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

20 JUN - 1 PM 3:38

RECEIVED
DIVISION OF STATE
CORPORATIONS

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

Haus of Skylan, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

RECEIVED
20 JUN -1 PM 3:30
CLERK OF STATE

The Articles of Organization for this Limited Liability Company were filed on 4/27/20 and assigned
Florida document number L20000113677

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)

10062 Stonehenge Circle Apt. 109
Boynton Beach, FL 33437

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

P.O. Box 740882
Boynton Beach, FL 33474

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>
owner MGRM	Christina N. Patterson	10062 Stonehenge Circle	<input checked="" type="checkbox"/> Add
		Apt. 109	<input type="checkbox"/> Remove
		Boynton Beach, FL 33437	<input type="checkbox"/> Change
MGRM	Aaniya M Williams	6400 Boynton Beach Blvd	<input type="checkbox"/> Add
		Boynton Beach, FL 33437	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	Skytan AA'vee Charles	6400 Boynton Beach Blvd	<input type="checkbox"/> Add
		Boynton Beach, FL 33437	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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(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.

Dated May 30th, 2020

Christina A. Patterson

Signature of a member or authorized representative of a member

Christina R. Patterson

Typed or printed name of signee