120000163856

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(Address)
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12/08/20--01027--008 **52.50

02/09/21--01001--023 **7.50

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FEB 1 0 2021 I ALBRITTON

COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT: Head	dly Enterprise Name of Lim	TRANSIL OF Flo	R. a.L.
The enclosed Articles of a	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Courter Hear	Name of Person	
	Mending unlesp	Firm/Company	LC
	9627 GMB	Address	
	Jackson ulle,	tL 30019	
	Hendlerenterson	is a Grand Com	fication)
For further information co	oncerning this matter, please c	all:	
Carther Here	e(† :a/t Person	at (904) 437-11 Area Code Daytim	te Telephone Number
Enclosed is a check for th	e 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
		Saura A. J. J	

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



January 25, 2021

CARLTON HENDLEY 9527 GARDEN ST JACKSONVILLE, FL 32219

SUBJECT: HENDLEY ENTERPRISES OF FLORIDA, LLC

Ref. Number: L20000163856

We have received your document for HENDLEY ENTERPRISES OF FLORIDA, LLC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

There is a balance due of \$7.50.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is L13000120120 - SKYE LOGISTICS LLC.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

www.sunbiz.org

Letter Number: 221A00001714

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Hendly Entrojet of (Name of the Limited Liability (A Florida	Company as it now appears on our records.) Limited Liability Company)
The Articles of Organization for this Limited Liability C Florida document number <u>しよいつの</u> し385 (ompany were filed on $\frac{7 + 3020}{(1 - 15 - 3)20}$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limi	ted liability company here:
SKyry Loc 34.65, L1-C The new name must be distinguishable and contain the words "Limi	ted Liability Company," the designation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	Some address
(Principal office address MUST BE A STREET ADDR	ESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Same Godeniess
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records, enter the name of the new registered
Name of New Registered Agent:	mue 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

Title	Name	Address	Type of Action
			□ Add
			□Remove
			□Change
			□Add
			□Remove
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Tectiv	ve date, if other than the date of filing:	(optional) prior to date of filing or more than 90 days after filing.) Pursu
ote: If	f the date inserted in this block does not meet the a	pplicable statutory filing requirements, this date will no
cumer	nt's effective date on the Department of State's rec	cords.
ecord .	specifies a delayed effective date, but not an effect	tive time, at 12:01 a.m. on the earlier of: (b) The 90th
is filed	ર્વ.	
	2	
ited _	d-5-2021	authorized representative of a member