L20000215302

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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COVER LETTER

| TO: Registration Se Division of Cor | | | |
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| Sky263 LL | С | | |
| SUBJECT: | Name of Limi | ited Liability Company | |
| | | united for Elian | |
| | Amendment and fee(s) are sub- | | |
| Please return all correspo | ondence concerning this matter | to the following: | |
| | Kai Stadler | | |
| | | Name of Person | |
| | Sky263LLC | | |
| | | Firm/Company | |
| | 218 Commercial Blvd, Ste | 106 | |
| | | Address | · · · · · · · · · · · · · · · · · · · |
| | Lauderdale by the Sea, FL | 33308 | |
| | | City/State and Zip Code | |
| | kaistadler@gmail.com | | ate and also |
| For further information of | E-mail address: (concerning this matter, please c | to be used for future annual report no all: | geneation) |
| Kai Stadler | | 954 696-3304 | |
| Name of Person | | at () Area Code Dayti | ime Telephone Number |
| | | | |
| Enclosed is a check for t | he following amount: | | |
| ■ \$25.00 Filing Fee | ☐ \$30.00 Filing Fee & Certificate of Status | S\$5,00 Filing Fee & Certified Copy (additional copy is enclosed) | ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| Mailing Addre | | Street Address: Registration S | Section |
| Registration Division of C | | Division of C | orporations |
| P.O. Box 63. | 27 | The Centre of | |
| Tallahassee. | FL 32314 | 2415 N. Mon | roe Street, Suite 810 |

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| (Name of the Limi | ted Liability Company as it now appears (A Florida Limited Liability Company) | on our records.) |
|--|--|--|
| The Articles of Organization for this Limited L Florida document number L20000215302 | iability Company were filed on 10/2 | |
| This amendment is submitted to amend the foll | owing: | 20 |
| A. If amending name, enter the new name o | of the limited liability company her | POZI NOV |
| The new name must be distinguishable and contain the | words "Limited Liability Company," the de | esignation "LLC" or the abbreviation "LLC" |
| Enter new principal offices address, if applic | | |
| Principal office address MUST BE A STREI | ET ADDRESS) | |
| Enter new mailing address, if applicable: (<u>Mailing address MAY BE A POST OFFICE</u> | <u>BOX)</u> | |
| B. If amending the registered agent and/or agent and/or the new registered office addre | registered office address on our re ess here: | ecords, enter the name of the new regist |
| | Lisa Molero | |
| Name of New Registered Agent: | | |
| | 218 Commercial Blvd, Ste 106 | |
| Name of New Registered Agent: New Registered Office Address: | | ida street address |
| | | ida street address , Florida 33308 |

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.

New Registered Agent's Signature, if changing Registered Agent:

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> | Address | Type of Action |
|--------------|------------------|---------------------------------|---|
| AMBR | Hermann Krassler | 218 Commercial Blvd, Ste 106 | □Add |
| | | Lauderdale by the Sea, FL 33308 | =Remove |
| | | | ☐ Change |
| AMBR | Kai Stadler | 218 Commercial Blvd, Ste 106 | dd |
| | | Lauderdale by the Sea. FL 33308 | FAdd 23 23 24 25 26 26 27 26 27 27 28 28 28 28 28 28 28 28 28 28 28 28 28 |
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| | | 10/22/2020 | | (and | tional) | |
| fective date, if other the neffective date is listed, the oter. If the date inserted incument's effective date of | date must be specific and this block does not a | d cannot be prior meet the applic | to date of filing or able statutory fil | more than 90 days after ing requirements, the | er filing.) Pursua | nt to 605,020 t be listed (|
| ecord specifies a delayed is filed. | effective date, but no | t an effective ti | me, at 12:01 a.n | o, on the earlier of: (| (b) The 90th o | lay after th |
| ted | | 2020 | <i>[]</i> | | | |
| | 1/// | 1/1/1 | | | | |
| | | | orized representati | ve of a member | | |
| | Signature of a | memoer or aum | mized representati | ve on a memmer | | |

Filing Fee: \$25.00