L2/00366263

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COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Rising Sky Capital 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:			
Joel Appiah Name of Person			
Rising Sky Capital LLC			
1900 N Bayshore Dr Apt 2810			
Miami, FL 33132 City/State and Zip Code			
E-mail address: (to be used for future annual report notification)			
or further information concerning this matter, please call:			
Joel Appiah at (786) 945-2440 Name of Person Area Code Daytime Telephone Number			
SUBJECT: Rising Sky Capital LLC Name of Limited Liability Company The enclosed Articles of Amendment and feets) are submitted for filing. Please return all correspondence concerning this matter to the following: Joel Appiah Name of Person			
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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

Rising Sky Co	apital LCC
(<u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L21000366203</u> .	y were filed on _03/16/2021 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	bility company here:
The new name must be distinguishable and contain the words "Limited Liabi	ility 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 agent and/or the new registered office address here:	address on our records, enter the name of the new registers
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:	<u>i</u>
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been positived in writing of this change	e performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is eaddress. I hereby confirm that the limited liability

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Nicole Barrere	1900 NBaymore Dr Apt 2810 Miami, FL 33132	2 MAdd
			_
			_ □Change
			_ 🗆 Add
			_ □Remove
			_ Change
			_ □Add
			_ □Remove
			_ DChange
		_ 🗆 Add	
			_ □Remove
			_ □Change
			_ 🗆 Add
			_ □Remove
			_ DChange
			_ DAdd :
			_ □Remove :
			_ Change

amending any other information, enter change(s) here: (Attach additional sheets, if necessal	
	
	
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	,
ffective date, if other than the date of filing: 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 tote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date occument's effective date on the Department of State's records.	g.) Pursuant to 605.0207
record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) T is filed.	he 90th day after the
ated 06/14/2024 12:01 am.	~?
attu	:
	:
the state of the s	
Signature of a prember or authorized representative of a member	

Filing Fee: \$25.00