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(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	#)
	TIAW	MAIL
(Bu	usiness Entity Nam	e)
(De	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	Office Use Only	Ý

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07/05/22--01031--013 ++25.00



COVER LETTER

TO: **Registration Section Division of Corporations**

708-720 NE 68th Street LLC SUBJECT: _____

Tallahassee, FL 32314

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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:

	Shimon Klepner				
	<u> </u>	Name of Person			
	Sky Developers LLC				
	Firm/Company				
	PO BOX 630246				
		Address			
	33163				
		City/State and Zip Code	<u>_</u> _		
	esther@skydevelopersnj.co	ពរ			
sther Rein	D'Person	718 666-0765 at () Area Code Davtime	: Telephone Number		
		nica code – izayinik			
nclosed is a check for t	he 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)		
<u>Mailing Addres</u>	·s :	<u>Street Address:</u>			
Registration Section		Registration Section			
Division of Corporations		Division of Corporations			
P.O. Box 632	27	The Centre of Tallahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

708-720 NE 68TH STREET LLC	2022 .		
(<u>Name of the Limited Liability Comp</u> (A Flottda Limited	any as it now appears on our records.) Ltability Company)		
The Articles of Organization for this Limited Liability Company Florida document number 1.22000086497	were filed on February 18 2022	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	<u>ility company here:</u>		
The new name must be distinguishable and contain the words "Limited Liabi Enter new principal offices address, if applicable:	lity Company." the designation "LLC" or the a	\sim	
(Principal office address MUST BE A STREET ADDRESS)	Apt 18G		
	Miami Florida 33180		
Enter new mailing address, if applicable:	PO BON 630246		
(Mailing address MAY BE A POST OFFICE BOX)	Miami, Florida 33163		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, <u>enter the nan</u>	<u>ie of the new registe</u>	
Name of New Registered Agent:	WAT		
New Registered Office Address: 19707 Tumber	y Driv e apt 18G		

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.

City

Miami

shi while he

, Florida <u>33480</u> Zip Code

Enter Florida street address

:

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
MRS	Esther Rein	3029 NE 1887H STREET	🗆 Add
		615	= Renove
		Miami Florida 33480	
			🗆 Add
			Change
			🗆 Add
			⊡Change
			⊡Add
		<u> </u>	🗆 Remove
			Change
			🗆 Add
			🗆 Remove
			□Change
			🖸 Add
		<u> </u>	□ □Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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Please change company address, registered person address and please remove listher Rein from Authorized person

o manage the LLC					
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If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated	
	Signature of a member or authorized representative of a member
Shimon Klepner	signature of a member of autionzed representative of a member

Typed or printed name of signee