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COVER LETTER

Skyway Flo	•		
SUBJECT:			
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Scott Smylie, Esq.		
		Name of Person	
	Smylie Law Firm, PLLC		
		Firm/Company	
	401 E. Jackson St., Suite 33	000	
	Tampa, Fl 33602	Address	
	doug.sullinger@vendita.com	City/State and Zip Code	~ <u>.</u>
	E-mail address: (i	to be used for future annual report notifica	tion)
For further information of	oncerning this matter, please ca	ali:	
Scott Smylie, Esq.		813 461-4564	clephone Number
Name o	d Person	at () Area Code Daytime To	chephone Number
Enclosed is a check for the	he following amount:		LIE 0
■ \$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> Registration S		<u>Street Address:</u> Registration Section)n

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section

TO:

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

Skyway Florida, PLLC

(Name of the Limited (A	Liability Compa Florida Limited	i <mark>ny as it now appears on our re</mark> Liability Company)	cords.)
The Articles of Organization for this Limited Liab Florida document number		were filed on	and assigned
This amendment is submitted to amend the follow	ing:		
A. If amending name, enter the new name of the	he limited liab	ility company here:	
The new name must be distinguishable and contain the word	ds "Limited Liabi	lity Company," the designation "	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicab	ole:	401 E. Jackson St., Suite 31	300
(Principal office address MUST BE A STREET.		Tampa, FL 33602	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		401 E. Jackson St., Suite 3, Tampa, FL 33602	300
B. If amending the registered agent and/or reg agent and/or the new registered office address		address on our records, <u>en</u>	nter the name of the new registere
Name of New Registered Agent: Scott Smylie. F		sq.	
New Registered Office Address:	401 E. Jackson St., Suite 3300		नित्र ७
		Enter Florida strees aa	ldress
	Tampa		. Florida ³³⁶⁰²
		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>	Address	Type of Action
MGR	Doug Sullinger	401 E. Jackson St., Suite 3300, Tampa, FL 33602	
			≣ Add
			□Remove
			□Change
MGR	Jeremy S. Larkin	9655 S Dixie Highway Suite 300, Miami, FL 33156	
			□Add
			≡ Remove
			□Change
			□Add
			
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Effective date, if other than the fan effective date is listed, the date mu. Note: If the date inserted in this blocument's effective date on the D	st be specific and canno lock does not meet th	t be prior to date o le applicable sta	it tiling or more than	(optional) 90 days after filing rements, this date	.) Pursuant to 605.02	197 (3) Pas the
record specifies a delayed effective is filed.	e date, but not an eff	ective time, at 1	2:01 a.m. on the	earlier of: (b) Th	ne 90th day after th	ie
January 5 Dated	202	3 .				
Dated	Mi O Cl Q	r or authorized re	presentative of a me	mher		
/1						

DIE E COLOR