

L22000369700

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

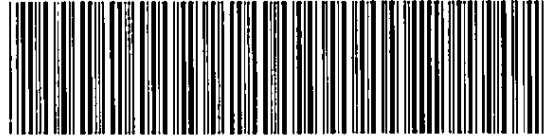
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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STATE
CLERK

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COVER LETTER

TO: Registration Section
Division of Corporations
Skyway Florida, LLC

SUBJECT: _____
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:

Scott Smylie, Esq.

Name of Person

Smylie Law Firm, PLLC

Firm/Company

401 E. Jackson St., Suite 3300

Address

Tampa, FL 33602

City/State and Zip Code

doug.sullinger@vendita.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Scott Smylie, Esq.

813 461-4564

Name of Person at (_____) _____
Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|--|--|--|

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

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2024 JAN -8 PM 1:19
TALLAHASSEE, FL
STATE

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>	<u>Address</u>	<u>Type of Action</u>
MGR	Doug Sullinger	401 E. Jackson St., Suite 3300, Tampa, FL 33602	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Jeremy S. Larkin	9655 S Dixie Highway Suite 300, Miami, FL 33156	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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2014 JUN - 8 PM 1:19
CLERK OF DISTRICT COURT
SOUTH FLORIDA
MIAMI

2024 JAN - 2

FILED
2024 JUN -8 PM 1:06
Pursuant to 605.0207 (3)(b)
will not be listed as the

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 January 5, 2023

Shirley M. Adams
Signature of a member or author

Brandy McAdams, Manager

Typed or printed name of signee