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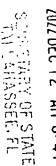
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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: SKY8 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:
Yehoshua, Yitzchak
Firm/Company
Division of Corporations ECT: SKY8 LLC Name of Limited Liability Company And Articles of Amendment and fee(s) are submitted for filing. The return all correspondence concerning this matter to the following: Yehoshua Yitzchak Name of Person Firm/Company 7 Willow Lane Address Creat Neck, Ny 11023 City/State and Zip Code Yitzchak Vehoshua Egmail Com E-mail address: (to be used for future annual report partification) There information concerning this matter, please call: And Shua Yitzchak at (S16) 9744 - 4907 Name of Person Name of Person Seed is a check for the following amount:
Great Nech, NY 11023 City/State and Zip Code
Yitzchakyehoshua Egmzil Com E-mail address: (to be used for future annual report motification)
For further information concerning this matter, please call:
Yehoshua, Yi +zChzK at (516) 974 - 4907 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
Certificate of Status Certified Copy Certificate of Status & Cadditional copy is enclosed) Certified Copy

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

SKY	18 LLC _	
(<u>Name of the Limited</u> (A	Liability Company as it now appears on our re Florida Limited Liability Company)	ecords.)
The Articles of Organization for this Limited Liab Florida document number 42200389		06/2072 and assigned
This amendment is submitted to amend the follow	ing:	
A. If amending name, enter the new name of th	ne limited liability company here:	
		2022
The new name must be distinguishable and contain the word Enter new principal offices address, if applicab		11 BC -1
(Principal office address MUST BE A STREET)	ADDRESS)	是2 用
		M 8: 41 OF STAT
Enter new mailing address, if applicable:		<u></u>
(Mailing address MAY BE A POST OFFICE BO	<u></u>	
B. If amending the registered agent and/or registered agent and/or the new registered office address b		nter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	 Enter Florida street ac	ddress
	City	, Florida Zip Code
Now Donistand Assats Cineston if showing Don	sictared Amous	

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
AMBR	Rafael Yehoshua	32 Howthorne Lane	□Add
		Great Neck, NY 11023	Remove
AMBR	Yehoshua, Yitzcha	Great Neck, NY 11023	A Add
		Great Neck, NY 11023	3_ □Remove
			□Change
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). If amending an	y other inform	ition, enter i	change(s) he	ere: <i>(Attach</i>	additional she	ets, if necess	sary.)	
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Effective date, it (If an effective date is Note: If the date document's effect	s listed, the date mu- inserted in this bl	t be specific an ock does not i	d cannot be prio	or to date of filin cable statutor	ng or more than 9 y filing require	(optiona O days after fili ments, this da	ng.) Pursuant to 6	.05.0207 (3)(isted as the
he record specifies ord is filed.	a delayed effectiv	e date, but no	t an effective	time, at 12:01	а.т. оп the ea	rlier of: (b)	The 90th day af	ter the
Dated	097 70	22	1	 -				
×	KA: X	Signature of a	member or aut	norized represed	ntative of a mem	ber		
×	RAFAEL	<u> </u>	HOSHIC:	4-	gnee			

Filing Fee: \$25.00