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Office Use Only



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COVER LETTER

TO:

Registration Section

ion of Cor	porations		
Sky Parters.	, LLC		
	Name of Lim	ited Liability Company	
Articles of	Amendment and fee(s) are sub	mitted for filing.	
ill correspo	ndence concerning this matter	to the following:	
	Lenora Fleming		
		Name of Person	
	Sky Partners. LLC		
		Firm/Company	
	3249 Belle Meade Trl		922 H
		Address	- in Ci
	Tallahassee, FL 32311		2022 11:07 17 AH 10: 2
		City/State and Zip Code	
	E-mail address: (to be used for future annual report no	otification) in the contraction of the contraction
ormation c	oncerning this matter, please c	all:	
ng		352 274-0709 at ()	
Name o	f Person	Area Code Dayti	me Telephone Number
check for th	e following amount:		
ling Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
istration S	Section	Street Address: Registration S	
	-		•
			oe Street, Suite 810
	Articles of all corresponds of the corresponds of t	Articles of Amendment and fee(s) are sub- all correspondence concerning this matter Lenora Fleming Sky Partners. LLC 3249 Belle Meade Trl Tallahassee, FL 32311 lenorayfleming@gmail.com E-mail address: (formation concerning this matter, please congerning this matter) Name of Person Check for the following amount: Sing Fee \$30.00 Filing Fee &	Articles of Amendment and fee(s) are submitted for filing. Articles of Amendment and fee(s) are submitted for filing. Il correspondence concerning this matter to the following: Lenora Fleming Name of Person Sky Partners. LLC Firm/Company 3249 Belle Meade Trl Address Tallahassee, FL 32311 City/State and Zip Code lenorayfleming@gmail.com E-mail address: (to be used for future annual report no formation concerning this matter, please call: Area Code Name of Person Name of Person Name of Person Certificate of Status Certified Copy (additional copy is enclosed) Ing Address: Street Address: Stration Section Sion of Corporations Division of Corporations Box 6327 The Centre of

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SKY PARTNERS, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 11/4/2022 and assigned Florida document number L22000474125 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability 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 address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address . Florida _

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.

Cin

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	Lenora Fleming	3249 Belle Meade Trl.	
		Taliahassee, FL 32311	□Remove
			■ Change
MGR	William Heath Fleming	3249 Belle Meade Trl.	□Add
		Tallahassee, FL 32311	□ Remove
			Change 22 10 DAdd
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Filing Fee: \$25.00