## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Comporations

Fax Number : (850) 617-6383

From:

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Addount Name : MOCRO SERVICES, LLC

Account Humber : 120060000061 enone : (845)425-0077 Fex Number : (845)816-3583

\*\*Enter too email address for this business entity to be used for tuture annual report mailings. Enter only one email address please. \*\*

Email Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SKY HIGH CAPITAL, LLC

Certificate of Status	(1
Certified Copy	()
Page Count	03
Estimated Charge	\$25.00

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Electronic Filing Menu — Corporate Filing Menu —

Help

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Sky High Capital, 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 $\frac{12/14/2022}{}$ and assigned Florida document number $\frac{1.22000522717}{}$ .
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here:
Sky High Capital Group LLC
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC"
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:
registered agent and/or the new registered winee andress nere.
Name of New Registered Agent:
New Registered Office Address:  Enter Florala street address
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

MGR = Manager

18886118813

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person, being added or removed from our records:

AMBR = Authorized Member				
<u>Title</u>	Name	Address	Type of Action	
			Add	
		□ Remove		
			☐ Change	
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		4. <del>71.14</del>	☐ Remove	
			Change	
			Remove	

	ion, enter change(s) here: (Attach additional sheets, if necessary.)
-	ion, enter change(s) here: (Attach additional sheets, if necessary.)  2022 DEC 16  AH 11:
Effective date, if other than the off an effective date is listed, the date must Note: If the date inserted in this bloodocument's effective date on the Department.	be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,02074 ck does not meet the applicable statutory filing requirements, this date will not be listed as if
the record specifies a delayed The 90th day after the reco	effective date, but not an effective time, at 12:01 a.m. on the earlier of: rd is filed.
December 16	2022
7//	7
<i></i>	Signature of a member or authorized representative of a member
	agrante in a memory of automorped representative of a memory
Kenneth Puzder	

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Filing Fee: \$25.00