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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CAMACHO & ASSOCIATES LLC

Account Number : I20220000154

: (323)453-5446

Fax Number

: (407)350-5660

就Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email Address: GOTCARDRAMOO @

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SKY LIMITS YET LLC

Certificate of Status	0
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Page Count	05
Estimated Charge	\$25.00

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He PEMIEUX MAY 2 4 2023

COVER LETTER

10:	Registration Se Division of Cor			
SUBJE	SKY LIMI CT:	T\$ YET LLC		•
		Name of Lin	nited Liability Company	
The enc	closed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please r	eturn all correspo	ndence concerning this matter	to the following:	
		SANTA MARIA, JORGE	Е	
			Name of Person	
		SKY LIMITS YET LLC		
			Firm/Company	
		2832 MICHIGAN AVE S	TE G	
			Address	
		KISSIMMEE, FL 34744		
			City/State and Zip Code	·····
		gotcarorlando@gmail.com		
			to be used for future annual report not	ification)
For furtl	ner information co	oncerning this matter, please c	ail:	
SANTA	MARIA, JORGI	E E	786 828-1788 at()	
	Name of	Person		ne Telephone Number
Enclose	d is a check for th	e following amount:		
■ \$25	.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

company has been notified in writing of this change.

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L23000243806		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	bility company here:	
SKY LIMITS JET LLC		
The new name must be distinguishable and contain the words "Limited Liab	ility Company." the designation "LLC" or the at	obteviation "L.L.C."
Enter new principal offices address, if applicable:	1685 LEE RD.	
Principal office address MUST BE A STREET ADDRESS)	WINTER PARK, FL 32789	
Enter new mailing address, if applicable:	1685 LEE RD.	
Mailing address MAY BE A POST OFFICE BOX)	WINTER PARK, FL 32789	·
		·
3. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, enter the nam	
New Registered Office Address:	<u> </u>	023
	Enter Florida street address	- · · · ·
		٠.
		κ 2 ω τ
iew Registered Agent's Signature, if changing Registered Agent:	, Florida	· Zip Code

being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability

□Remove

__ ПСћапде

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 = M $AMBR = A$	anager uthorized Member		
Title	<u>Name</u>	Address	Type of Action
 -			DAdd
			□Remove
			Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			©Change
			□Add
			□Remove
			□ Change
			□Add
			Romove
			□Change
			□Add

	er information, enter change(s) here: (Attach additional sheets, if necessary.)
 	
	
 	
	
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Effective date, if othe	r than the date of filing: MAY 22, 2023 (optional)
If an effective date is listed.	the date must be specific and cannot be prior to date of filips at most by 90 days of
TI THE CHIE HISCILL	ed in this block does not meet the applicable statutory filing requirements, this date will not be listed as the on the Department of State's records.
c record specifies a delay	red effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
rd is filed.	
, MAY 22	2023
Dated	. 2023
	X -
	Signature of a member or authorized representative of a member
+	T = 0
46	DRGE E. SALTANARIA.