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SHAWKSEFF FRORIDA

COVER LETTER							
TO: Registration Section Division of Corporations	. •						
SUBJECT: Sky Bonber LLC Name of Limited Liability Company							
Dear Sir or Madam:							
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following:							
James Frederick Name of Person							
Sky Bomber UC Firm/Company							
2547 24th Street							
School Solva Fl 34234 City/State and Zip Code							
James Frederick 0527 [E-mail address: (to be used for future annual report	Tames Frederick 0527 (tako.com E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please e	all:						
James Frederick at (at (917) 300 · 4145 Area Code & Daytime Telephone Number						
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						
Enclosed is a check for the following amount:							
\$25 Filing Fee	S55 Filing Fee & Certified Copy						

INHS18 (2/14)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Na	ame of the limited liability company: $\frac{Sk}{}$	y BO	nbel	UC	
2. (a)	2547 24 th Stier	e^{t}	2547	Zyth	street
(-,	Principal office address of limited liability company	v:	`		l liability company:
	(Note: MUST BE STREET ADDRESS)		(<u>:Not</u>	e: MAYBE POST	
	Sarasota H 3423	34	SCITO	150tg	C1 34530
	- · · · · · · · · · · · · · · · · · · ·				
	0/10/23		L730	XXXX	1957
3.	Date of filing registration in Florida	4.	Docu	ment number	
5. (a)	Republic Renistered	Acient	- 116		
J. (#)	Registered Agent and Registered Office shown on the recor	rds of the Florida [Dept. of State:		
	1150 NW 72nd A	ve To	Som		
	Registered Office Address (MUST BE FLORIDA STR	<u>EET ADDRESS)</u>			
	ste 455				
	Miami	, FL 33	251		
(b)	Enter name of NEW Registered Agent and/or NEW Regis	stored Office add	*056'		
		street			
	2547 24 th Sa	the contraction	•		20.
	NEW Registered Office Address:			7.0	
				E E	= =
				55	5
	Sarasota	_FL <u>34</u>	234	רי. רי	FILED
If the I	imited liability company is not organized under th	ne laws of the S	tate of Florida.	it is hereby con	Firmed that after the
change	or changes are made, the Florida street address o	of the registered	office and the	business office	of the registered
	will be identical. Or, in the case of a Florida limit ere authorized by an affirmative vote of the memb				
	icles of organization or the operating agreement o	f the limited lia	bility company	•	
<u></u>		$\overline{}$	ames	Frede ed or typed name o	rick
-	ture of a member or authorized representative of a member				
provisi the obl to merc	by accept the appointment as registered agent and ions of all statutes relative to the proper and compligations of my position as registered agent as property reflect a change in the registered office addressed in writing of this charge.	d agree to act in plete performan ovided för in Ch sss, I hereby con	n this capacity. ice of my duties apter 605, F.S. firm that the lii	I further agree, and I am fami, Or, if this doct nited liability co	to comply with the liar with and accept unent is being filed ompany has been
1	re of Registered Agent	_			
OINTELL	NE VIENCEMOTOU PIXOU				