MI7000002227

(Re	questor's Name)					
(Ad	dress)					
(Address)						
(Cit	y/State/Zip/Phon	e #)				
PICK-UP	☐ WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						

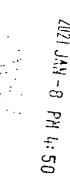




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01/08/21--01015--011 ++25.00

S. YOUNG



COVER LETTER

	Registration Section Division of Corporations	
SUBJE	Sky Climber Services LLC	
., .		Limited Liability Company
Dear Sir	or Madam:	
The encl	losed Registered Agent/Registered Office Ch	nange and fee(s) are submitted for filing.
Please re	eturn all correspondence concerning this mat	ter to the following:
Roger T.	. Whitaker	
	Name of Person	
Luper N	eidenthal & Logan	
	Firm/Company	
1160 Du	ıblin Rd Suite 400	
	Address	
Columbi	us, OH 43215-1052	
	City/State and Zip Code	
barcher@	@skyclimber.com	
E-:	mail address: (to be used for future annual re	eport notification)
For furth	her information concerning this matter, pleas	se call:
Roger T	. Whitaker	614 229-4422
	Name of Person	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 amou	unt:
	■ \$25 Filing Fee	☐ \$55 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: Sky Climber Ser	vices, Ll	.C			
2. (a)	1600 Pittsburgh Dr.	ĺ	(b) 1600 Pittsl	ourgh Dr.		
. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address o (Note: MAY B		, , ,
	Delaware, OH 43015		Delaware,	OH 43015		
	March 14, 2017		M17000002	227	-	
3.	Date of filing/registration in Florida	4.		Document nui	nber	
5. (a)	Erick Jimenez					
	Registered Agent and Registered Office shown on the records of 11 SW 12th Ave. Registered Office Address (MUST BE FLORIDA STREET)			-		
	Dania Beach, F	L_33004				202
(1.)	Carrie Caston				÷	- <i>I</i>
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	d Office a	ddress:	-		9 - HVF 120
	NEW Registered Office Address:			-		PH 4: 50
	, F	L				
change agent v was/w	imited liability company is not organized under the last or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	e registe iability o of the li	red office and company, it is mited liability	I the business hereby confir company or a	office of the of the of the office of the of	he registered he change(s)
	Bolo auler		POR A	ACHER	CE	70
	ature of a member or authorized representative of a member			Printed or typed		
provisi the obi to mer	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provide elv reflect acchange in the registered office address. I d in writing of this change.	ree to ac perforned for in hereby	et in this cape nance of my e Chapter 605 confirm that t	icity. I further luties, and I ar , F.S. Or, if th he limited liah	agree to on familiar is docume oility comp	comply with the with and accep int is being filed any has been
Signatu	ire of Registered Agent					