N180000008871

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COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

NAME OF CORPORATION: Skyes the	limit, Inc.	<u>.</u>	
N18000008871 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are	submitted for filing.		
Please return all correspondence concerning this	matter to the following:		
D'Archa Bennett C/O Monroe Langston, Inc.			
	(Name of Contact P	erson)	
Monroe Langston, Inc.			
	(Firm/ Compan	y)	
P.O. BOX 16692			
	(Address)	•	
Savannah, GA 31416			
	(City/ State and Zip	Code)	
admin@monroelangston,com			
E-mail address: (to be	used for future annual re	port notification	n)
For further information concerning this matter, p	lease call:		
D' Archa Bennett	at	912	220-7721
(Name of Contact Pe		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount ma	de payable to the Florida	Department of	State:
■ \$35 Filing Fee □\$43.75 Filing Fee Certificate of Sta	e & □\$43.75 Filing Fee ttus Certified Copy (Additional copy i enclosed)	Certif s Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)
Mailing Address Amendment Section		reet Address nendment Sect	ion
Division of Corporations		vision of Corpo	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation of

Skyes the limit, Inc.		
(Name of Corporation as currently filed with the I	Florida Dept. of State)	
N18000008871		
(Document)	nt Number of Corporation (if k	nown)
Pursuant to the provisions of section 617.1006, Floric amendment(s) to its Articles of Incorporation:	da Statutes, this <i>Florida Not Fo</i>	or Profit Corporation adopts the following
A. If amending name, enter the new name of the c	corporation:	
STL- Skyes the limit, Inc.		The new
name must be distinguishable and contain the word " "Company" or "Co." may not be used in the name.	'corporation" or "incorporated	
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD		
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE Bo</u>	<u></u>	
D. If amending the registered agent and/or registered new registered agent and/or the new registered		enter the name of the
Name of New Registered Agent:		
<u>New Registered Office Address</u> :	(F	lorida street address)
		Florida
	(Cîŋ)	(Zip Code)
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agent.		the obligations of the position.
	Signature of New Regist	ered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add			
Remove			
2) Change Add			
Remove 3) Change Add Remove			
4) Change Add			
Remove 5) Change Add Remove			
6) Change Add			
		onal Articles, enter change(s) here: essary). (Be specific)	

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		-
		
The date of each amendment(s) adopted date this document was signed.	on:	, if other than the
Effective date if applicable:		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	· ··- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·
Note: If the date inserted in this block do document's effective date on the Department.	es not meet the applicable statutory filing requirements, this date will not be ent of State's records.	e listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted was/were sufficient for approval.	d by the members and the number of votes cast for the amendment(s)	

signature	D'Archa Bennett
	(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	D'Archa Bennett
	D'Archa Bennett (Typed or printed name of person signing)
	(Typed or printed name of person signing)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were

adopted by the board of directors.