## P18000051777

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C. GOLDEN JAN 1 4 2020

## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: _	sky In	K Drintion	INC
DOCUMENT NUMBER:	P180000517	77	
The enclosed Articles of Amendn	nent and fee are submit	ted for filing.	
Please return all correspondence c	oncerning this matter t	o the following:	
	us David	RIVEROS 6	DON 6 5
	Sky Ink	Firm/ Company	1 / C.
139		114 terrace	
		Address	,
$M_{\sim}$	m Fl	3318 ( ity/ State and Zip Code	5
S <b>K</b> E-mai		annual report n	octification)
For further information concerning	g this matter, please ca	11:	
Name of Contact F	Rivero 5	at ( <u>786</u> Area Code	S856453 & Daytime Telephone Number
Enclosed is a check for the follow	ing amount made paya	ble to the Florida Depar	tment of State:
□ \$35 Filing Fee	ificate of Status (	\$43.75 Filing Fee & Certified Copy Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Sec Division of Corp P.O. Box 6327 Tallahassee, FL	etion porations /	Division The Cer 2415 N.	ddress nent Section of Corporations ntre of Tallahassee Monroe Street, Suite 810 see, FL 32303

## Articles of Amendment to

## Articles of Incorporation

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sky lin	K Aviat	IOA	1 ^ C	2019 DEC -9 PH
(Name of Corp	poration as currently	filed with the	Florida Dept. of	State)
P18000	7051777			
()	Document Number of	Corporation (if	known)	
Pursuant to the provisions of section 607.1006. I its Articles of Incorporation:	Florida Statutes, this I	Horida Profit C	o <i>rporation</i> adopt	s the following amendment(s)
A. If amending name, enter the new name of	the corporation:			
				The new
name must be distinguishable and contain the wo "Inc.," or Co.," or the designation "Corp," "chartered," "professional association," or the	"Inc," or "Co". A	ompany," or "in professional c	icorporated" or t orporation name	he abbreviation "Corp.," must contain the word
B. Enter new principal office address, if appl (Principal office address MUST BE A STREE)				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC	<u>E BOX</u> )			
D. If amending the registered agent and/or re		ess in Florida, e	enter the name o	of the
<u>Name of New Registered Agent</u>				
	(Florida stre	et address)		
New Registered Office Address:			Fl	orida
	(	City)	, · · · · ·	(Zip Code)
New Registered Agent's Signature, if changin I hereby accept the appointment as registered ag	g Registered Agent: gent. I am familiar w	ith and accept ti	he obligations of	the position.
	Signature of Nove Re		(C.)L	

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.

Mike Jones, V as Remove Example:	, and Sal	ly Smith, SV as an Add	!				
X Change	$\underline{\mathbf{p_T}}$	John Doe					
X Remove	<u>V</u>	Mike Jones					
X Add	<u>sv</u>	Sally Smith					
Type of Action (Check One)	<u>Title</u>	<u>Name</u>			<u>Addreş</u> s		
1) Change		_ willia	m Riveros	<u> G</u> omez	10773	1 285 WY	华177
_ <b>_X</b> _ Add					Minne	FL 331	78
Remove					· · · · · · · · · · · · · · · · · · ·		
2) Change							
Add							
Remove 3) Change				<del>-</del>			
Add					<u> </u>		
Remove				-			
4) Change			<del></del>			·	
Add					· <u> </u>		
Remove				•			
5) Change							
Add							
Remove				-			
6) Change		_		_ <del></del> .			
Add							
Remove				-	<del></del>		
			Page 2 of 4				

es manerating of adding additional Afficies, effer change(s) he	<u>lding additional Articles, enter chang</u>	<u>(e(s)</u> here
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(Attach additional sheets, if necessary). (Be specific)

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an amendment provides for an exchange	e, reclassification, or cancellation of issued sh	nares,
an amendment provides for an exchange provisions for implementing the amendm (if not applicable, indicate N/A)	e, reclassification, or cancellation of issued shent if not contained in the amendment itself:	nares,
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(no more than 90 days after amendment file date)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s)	( <u>CHECK ONE</u> )
☐ The amendment(s) was/were adop by the shareholders was/were suf	pted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for	or the amendment(s) was/were sufficient for approval
by	
	(voting group)
★ The amendment(s) was/were adopted action was not required.	oted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopaction was not required.	oted by the incorporators without shareholder action and shareholder
Dated	52/19
Signature	Luis RG
selected.	ector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)
_	(Typed or printed name of person signing)
_	President
(*	Title of person signing)