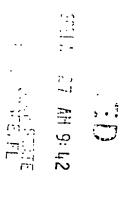
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**Department of State** 

**Division of Corporations** 

Date: 04/26/2021

American Expediting (Stealth Courier)

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Company: Sky Blue Mountain SAS Co

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#### COVER LETTER

TO: Amendment Section Division of Corporations SKY BLUE MOUNTAIN SAS CO NAME OF CORPORATION: P20000010324 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: MARCELO, CARLA Name of Contact Person Firm/ Company 7050 W PALMETTO PARK RD, #15-300 Address BOCA RATON, FL 33433 City/ State and Zip Code OPERATIONS@ACHIEVEGEA.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: MARCELO, CARLA 5035983 Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: **□\$43.75** Filing F∞ & ■ \$35 Filing Fee **□\$**43.75 Filing Fcc & □\$52.50 Filing Fcc Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroc Street, Suite 810
Tallahassee, FL 32303

#### **COVER LETTER**

TO: Amendment Section Division of Corporations SKY BLUE MOUNTAIN SAS CO NAME OF CORPORATION: P20000010324 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: MARCELO, CARLA Name of Contact Person Firm/ Company 7050 W PALMETTO PARK RD, #15-300 Address BOCA RATON, FL 33433 City/ State and Zip Code OPERATIONS@ACHIEVEGEA.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: MARCELO, CARLA Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: **\$**35 Filing Fcc □\$43.75 Filing Fee & ☐\$43.75 Filing Fee & □\$52.50 Filing Fcc Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations **Division of Corporations** 

P.O. Box 6327 Tallahassee, FL 32314 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

### Articles of Amendment to Articles of Incorporation of

SKY BLUE MOUNTAIN SAS CO

SKT BEODAGOGTART SAG CO		1
P20000010324 (Name of Corporation as cur	rently filed with the Florida Dept. of State)	
Document Num	ber of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, its Articles of Incorporation:	, this Florida Profit Corporation adopts the fo	llowing amendment(s)
A. If amending name, enter the new name of the corporation	<u>n:</u>	
name must be distinguishable and contain the word "corporation	n, ""company," or "incorporated" or the abb	The new reviation "Corp."
"Inc.," or Co.," or the designation "Corp," "Inc," or "Co "chartered," "professional association," or the abbreviation "		contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	<del></del>	77-
		1
		<del>-</del>
C. Enter new mulling address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		3
(		
		1
<ul> <li>If amending the registered agent and/or registered office new registered agent and/or the new registered office ade</li> </ul>		به به
Name of New Registered Agent		M 9: 42
		्रा ।
(Flori	da street address)	
New Registered Office Address	, Florida_	<u> </u>
	(City)	(Ztp Code)
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am fami		l ultion
The second of appearance of the second of th	sur with and decept the confunctions of the poc	
		1
Signature of N	'ew Registered Agent, if changing	
Check if applicable		; t
☐ The amendment(s) is/are being filed pursuant to s. 607.0120	(11) (e), F.S.	1

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.

X Change	<u>PT</u>	John Doc	l .	
X Remove	Ā	Mike Jones	;	
X Add	<u>sv</u>	Sally Smith	;	
Type of Action (Check One)	<u>Title</u>	Name	Address ,	
1) Change	P	MARTINEZ, JUAN C	9907 THREE LAKES CIRCLE	3
Add			BOCA RATON, FL 33428	
Remove	s	MARCHENA, LUIS A	9907 THREE LAKES CR	
2) Change		WARCHENA, LOIGA	<u> </u>	
Add			BOCA RATON, FL33428	
Remove 3) Change	P	JARAMILLO, SANTIAGO	9907 THREE LAKES OR	
$\frac{1}{2}$ $\wedge$ dd			BOCA RATON, FL 33428	
•			· · · · · · · · · · · · · · · · · · ·	
Remove 4) Change			t	
Add				
Remove			j •	
5)Change			, 1	
Add				
Remove			· · · · · · · · · · · · · · · · · · ·	
б) Change		•	<u> </u>	
Add			į	
Remove			1	
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(Attach additional sheets, if necessary). (Be specific)	·
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If an amendment provides for an exchange, reclassification, of provisions for implementing the amendment if not contained	cancellation of issued shares.
(if not applicable, indicate N/A)	in the amenament toen.
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	,
	:

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The date of each amendment(s) adoption:	if other than t
date this document was signed.	1
Effective date if applicable:	<b>P</b> .
(no more than 90 days after amendment file date)	<del>.</del>
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	will not be listed as t
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action action was not required.	and shareholder
The amendment(s) was/were adopted by the shareholders. The number of votes cust for the amendment(s) by the shareholders was/were sufficient for approval.	;
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
'The number of votes cust for the amendment(s) was/were sufficient for approval	
by	I ♥
(voting group)	,
4/26/2021	1 h
Dated	,
Signature Jun Mlune	•
(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)  MARCHENA, LUIS A	, , , , , , , , , , , , , , , , , , ,
(Typed or printed name of person signing) SECRETARY	<u> </u>
(Title of person signing)	<u>.</u>