

**2020 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L19000216722

**Entity Name:** LUKE SKYBUILDER LLC

**Current Principal Place of Business:**

2456 N UNIVERSITY DR  
PEMBROKE PINES, FL 33024

**Current Mailing Address:**

2456 N UNIVERSITY DR  
PEMBROKE PINES, FL 33024 US

**FEI Number:** 84-2837253

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BROKER MODEL P.A.  
2456 N UNIVERSITY DR  
PEMBROKE PINES, FL 33024 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title           MANAGER  
Name           AMORESANO, LUKE T  
Address       17901 NW 68TH AVE  
                  APT T102  
City-State-Zip: HIALEAH FL 33015

Title           MANAGER  
Name           ESCANDON, IGNACIO  
Address       9192 SOUTHERN OAK ROAD NORTH  
City-State-Zip: DAVIE FL 33328

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** LUKE AMORESANO

**MANAGER**

**11/08/2020**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date