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G. MCLEOD

JUN 17 2011

EXAMINER



200208695722

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IN JUN 16 PH 1:44

COVER LETTER

Division of Corporations						
SUBJECT:	911 HEATING & A	AIR CONDITIONING LLC				
	Name of Limi	ted Liability Company				
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.				
Please return all corresp	ondence concerning this matter	to the following:				
	s	TEVEN D. MURRAY				
		Name of Person				
	911 HEATING & AIR CONDITIONING					
	Firm/Company					
	1016 FREEPORT COURT					
	Address					
	MARY ESTHER, FL 32569					
	City/State and Zip Code					
	STEVEN1958@COX.NET E-mail address: (to be used for future annual report notification)					
nice at the at	•	•	nion)			
for further information (concerning this matter, please c	au:				
STEV	EN D. MURRAY	at (_850)56	81-2911			
Name of Person Area Code & Daytime Telephone Number		elephone Number				
Enclosed is a check for t	he following amount:					
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			

MAILING ADDRESS:

TO:

Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

911 HEATING & AIRCONDITIONING

(Name of the Limited Liability C (A Florida Lin	Company as it now appearance it ability Company)	ars on our records.)		
The Articles of Organization for this Limited Liability Cor	mpany were filed on	MAY 23, 2011	and assigned	
Florida document number L11000060558				
This amendment is submitted to amend the following:				
A. If amending name, <u>enter the new name of the limite</u>	d liability company he	<u>re</u> :		
The new name must be distinguishable and end with the words 'L.L.C."	s "Limited Liability Comp	pany," the designation "LL	C" or the abbreviatio	
Enter new principal offices address, if applicable:				
Principal office address MUST BE A STREET ADDRE	<u> </u>			
				
			€ ≠	
Enter new mailing address, if applicable:				
Mailing address MAY BE A POST OFFICE BOX)		(S)		
	· 	<u></u>		
		777	v) To g + t	
3. If amending the registered agent and/or register	red office address on			
egistered agent and/or the new registered office addre	ss here:	<u> </u>	-	
Name of New Registered Agent:				
Nov. Posistand Office Address.				
New Registered Office Address:	Enter Florida street address			
		, Florida		
	City		Zip Code	

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If amending the Managers or Mafaging Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	KIMBERLY SCHEMBRI	1016 FREEPORT COURT MARY ESTHER FL 32569	Add Remove
*******			Add Remove
	**************************************		Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amend	ding any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary.)	
_			_
	JUNE 9 20	011	
<u></u>	Atur D.	er or authorized representative of a member	
		EVEN D. MURRAY	
	Турес	d or printed name of signee	

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Filing Fee: \$25.00