114000124511

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COVER LETTER

	egistration Se ivision of Cor	
SUBJECT		DYNAMICS LLC
ook ne i	•	Name of Limited Liability Company
The enclose	ed Articles of	Amendment and fee(s) are submitted for filing.
Please retur	m all correspo	ondence concerning this matter to the following:
		STEPHEN PEGUES
		Name of Person
		THERMODYNAMICS LLC
		Firm/Company
		2791 EAGLE LAKE DRIVE
		Address
		CLERMONT FL 34711
		City/State and Zip Code
		SISKREPAIR@GMAIL.COM E-mail address: (to be used for future annual report notification)
For further	information co	concerning this matter, please call:
STEPHEN	PEGUES	407 6163542 at ()
	Name of	
Enclosed is	a check for the	he following amount:
\$25.00	Filing Fee	□ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) □ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

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

THERMODYNAMICS LLC		
(<u>Name of the Limited Liabi</u> (A Flori	lity Company as it now appears on our records.) la Limited Liability Company)	
The Articles of Organization for this Limited Liability Florida document number L14000124511	Company were filed on 01/16/2015	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	17 OCT
The new name must be distinguishable and contain the words "Li	mited Liability Company," the designation "LLC" or the	e abbreviation "L.L.G."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	RESS)	<u>بن</u>
		<u> </u>
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office ad		er the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	[75 7 . A .	
	, Florida	 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 605, 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 Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	STEPHEN PEGUES	2791 EAGLE LAKE DRIVE	■ Add
		CLERMONT FL 34711	□ Remove
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			Add
			□ Remove
			☐ Change
			Add CT - Ve PH Change
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an effective date: fote: If the date	is listed, the date mu e inserted in this b	e date of filing: ist be specific and ca	nnot be prior to da et the applicable	te of filing or more the statutory filing requ	(optional an 90 days after filing airements, this date) g.) Pursuant to 605.0207 e will not be listed as
						on the earlier of
ated <i>[C</i>	12/201	7				
	Stepfion	Signature of a mer	mber or authorized	representative of a n	nember	
				•		

Page 3 of 3

Filing Fee: \$25.00