## L21000036570

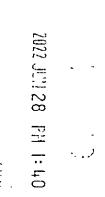
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(Address)  (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:		
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C/ 9/25/2022

## **COVER LETTER**

TO: Registration of Division of	on Section Corporations			
CAM'S	S HVAC CONSULTING LLC			
3000ECT	Name of Lim	ited Liability Company		
The enclosed Article	es of Amendment and fee(s) are sub	mitted for filing.		
Please return all con	respondence concerning this matter	to the following:		
	Amber Kemeys			
		Name of Person		
	CAM'S HVAC CONSULTING LLC			
		Firm/Company	<del></del>	
		Address		
	Lakeland, Florida 33605			
		City/State and Zip Code		
	ckhvacllc@gmail.com E-mail address: (	to be used for future annual report notil	fication)	
For further informat	ion concerning this matter, please ca	all:		
Cameron Kemeys		863 279-8743		
Nz	une of Person	at ()	c Telephone Number	
Enclosed is a check	for the following amount:			
<b>≘ \$2</b> 5.00 Filing Fo	ee ☐ \$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 Ac	Idress:	Street Address: Registration Sec		

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

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## **ARTICLES OF AMENDMENT** ARTICLES OF ORGANIZATION OF

CAM'S HVAC CONSULTING LLC

<del>2022 J</del>UN 28 FN 1:40 Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 01/19/2021 and assigned Florida document number L21000036570 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: CAMS HVAC LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address . Florida 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

st 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 =	<b>Authorized Member</b>

<u> Title</u>	<u>Name</u>	Address	Type of Action
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			[L]Remove
			□Change
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ctive date, if other than the date of filing effective date is listed, the date must be specific and one if the date inserted in this block does not make the date inserted in the Department of States.	annot be prior to et the applicab	date of filing or m le statutory filin	ore than 90 days af z requirements. t	tional) fer filing.) Pursuant his date will not b	to 605.03 e 11stec
ord specifies a delayed effective date, but not a filed.	n effective tim	e, at 12:01 a.m.	on the earlier of:	(b) The 90th da	y after ti
June 22	2022	. •			
Anala Va	. λ				

Filing Fee: \$25.00

Typed or printed name of signee