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COVER LETTER

TO: Registration So Division of Cor			
Ray's Air C	Conditioning LLC		
SUBJECT:	Name of Lin	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Grace Martin		
		Name of Person	
	Martin Mechanical LLC		
		Firm/Company	
	1 2 091 Palm Dr		
		Address	
	Fort Myers FL 33908		
		City/State and Zip Code	
	raygracemartin@gmail.com	to be used for future annual report not	(No. 1/100)
For firsther information of	concerning this matter, please c	·	meation)
	concerning this matter, please c		
Grace Martin		815 708-4384 at ()	
Name o	n' Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for the	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 Addres Registration		<u>Street Address:</u> Registration Se	ection
Division of C		Division of Co	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

P.O. Box 6327

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Ray's Air Conditioning LLC				
(Name of the Lim	ited Liability Comp (A Florida Limited	any as it now appear. Liability Company)	s on our records.)	
he Articles of Organization for this Limited	Liability Compan	y were filed on (04')	02/2024	and assigned
lorida document number 1.24000157742	,			
his amendment is submitted to amend the fo	llowing:			
. If amending name, enter the new name	of the limited lia	bility company he	<u>re</u> :	
fartin Mechanicał LLC				
he new name must be distinguishable and contain the	words "Limited Liab	oility Company," the do	esignation "LLC" or the abbi	reviation "L.L.C."
Enter new principal offices address, if applicable:		N/A		
Principal office address MUST BE A STRE	ET ADDRESS)			
		N// A	73 <u>-</u>	F 1024 HAY
nter new mailing address, if applicable:		N/A		\$ 71
(Mailing address MAY BE A POST OFFICE BOX)			تَنْهَ ت	7
				<u>≥</u> ∏
. If amending the registered agent and/or gent and/or the new registered office addr	registered office ess here:	address on our re	ecords, enter the name	of the new regist
				
Name of New Registered Agent:	N/A			
New Registered Office Address:	N/A			
	Enter Florida street address			
		City	, Florida	Zip Code
		(in.		

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
			□ Add
			□Remove
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			□Change

N/A		
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ffective date, if other than the	date of filing: st be specific and cannot be prior to date of filing or n	(optional)
an effective date is listed, the date mu	st be specific and cannot be prior to date of filing or n ock does not meet the applicable statutory filir	nore than 90 days after filing.) Pursuant to 605,0207
ocument's effective date on the I		ig requirements, this date will not be fisted as
	•	
record specifies a delayed effectiv	e date, but not an effective time, at 12:01 a.m.	on the earlier of: (b). The 90th day after the
d is filed.	e date, but not an effective time, at 12.01 a.m.	on the carrier of (0) The 30th day after the
April 27th	2024	
ated April 27th	·	
AAAA		
- SALLAN	Signature of a member or authorized representative	e of a member
	•	
Grace Martin		
	Typed or printed name of signee	

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