## 434488

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORAT	ION: SERGE'S A	IR CONDITIONIN	NG, INC.
DOCUMENT NUMBER	434488		
The enclosed Articles of A	mendment and fee are sub	omitted for filing.	
Please return all correspond	dence concerning this mat	ter to the following:	
	SARA S	JAZQUEZ, VICE-	PRESIDENT
		(Name of Contact Pers	son)
_	SERGE	'S AIR CONDITI	ONING, INC.
		(Firm/ Company)	
1755 WEST	HILLSBOROUGH A	/E., TAMPA, FL	. 33603
		(Address)	
		(City/ State and Zip Co	de)
	sergesac@verizo	on.net	
	E-mail address: (to be used	for future annual repor	t notification)
For further information con	cerning this matter, please	call:	
SARA VAZQU		at	813-875-6604 OR 813-810-080
	(Name of Contact Person	) (A	Area Code) (Daytime Telephone Number)
Enclosed is a check for the	following amount made pa	ayable to the Florida Dep	partment of State:
⊠ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing A	Address	Strapt	Addrage

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

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

## Articles of Amendment to Articles of Incorporation of

SERGE'S AIR CONDITIONING, INC.

(Name of Corporation as currently filed with the Flori	ida Dept, of State)	
434488		
(Document N	umber of Corporation (if ki	nown)
Pursuant to the provisions of section 617.1006, Florida Stamendment(s) to its Articles of Incorporation:	atutes, this <i>Florida Not Fo</i>	r Profit Corporation adopts the following
A. If amending name, enter the new name of the corpo	oration:	
N/A		The new
name must be distinguishable and contain the word "corp "Company" or "Co." may not be used in the name	ooration" or "incorporatea	l" or the abbreviation "Corp." or "Inc."
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRE</u>	ESS)	
		203
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
-		- 4
D. If amending the registered agent and/or registered	office address in Florida,	enter the name of the
new registered agent and/or the new registered offi	<del></del>	
Name of New Registered Agent:	N/A	
New Registered Office Address:	(Fla	rida street address)
Hew Registered Office Address.	N/A	
<del></del> -	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I an	red Agent:	. ,
	N/A	
<del></del>	Signature of New Registe	red Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change X Remove X Add	PT John D V Mike J SV Sally S	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) _X_ Change Add		SARA VAZQUEZ	6426 GARLAND CT., N.P.R.,FL
Remove  2) Change Add		JOHN VAZQUEZ	6507 N. PACKWOOD AVE., TAMPA FL. 33603
Remove 3) Remove Add Remove	T/ <u>S</u>	SARA VAZQUEZ	
4) Change Add			
Remove 5) Change Add			
6) Change Add			
Remove E. If amending or a (attach additional	sheets, if necessary).	icles, enter change(s) here: (Be specific)	
	N/A		

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		SERGE'S AIR CONDITIONING, INC.  1755 W. Hillsborough Avenue TAMPA, FLORIDA 33603 (813) 875-6604 884-3684 State Cert. Lic. #CMC057038 State Cert. Lic. #CAC016003
The date of each amendment(s) adoption:date this document was signed.	7-22-20 AS SOON AS YOU	, if other than the
Effective date if applicable: (no i	H > SOUM H > IOU nore than 90 days after amendment file date)	ICAN
Note: If the date inserted in this block does no document's effective date on the Department of	t meet the applicable statutory filing requirement f State's records.	ents, this date will not be listed as the
Adoption of Amendment(s) (CF	<u>IECK ONE)</u>	
_	<del></del>	
The amendment(s) was/were adopted by the was/were sufficient for approval.	ne members and the number of votes cast for the	he amendment(s)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
Dated $7-22-20$
Signature  (By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
SANA VAZGUEZ (Typed or printed name of person signing)
Vice-President

(Title of person signing)

8ERGE'S AIR CONDITIONING, INC. 1755 W. Hillsborough Avenue TAMPA. FLORIDA 33603 (813) 875-6604 884-3884 State Cert. Lic. #CMC057038 State Cert. Lic. #CAC016003