## 104000011605

| (Requestor's Name)                      |
|---|
|   |
| (Address)                               |
|   |
| (Address)                               |
| (Address)                               |
|   |
| (City/State/Zip/Phone #)                |
|   |
| PICK-UP WAIT MAIL                       |
|   |
| (Business Entity Name)                  |
| ,                                       |
|   |
| (Document Number)                       |
|   |
| Certified Copies Certificates of Status |
|   |
| Consideration to Filing Officer         |
| Special Instructions to Filing Officer: |
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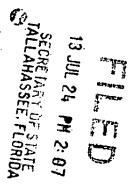
Office Use Only



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DEPARTHENT OF STATE



## **COVER LETTER**

| TO: Registration So<br>Division of Con |   | <b>X</b>  | •   |
|--|---|---|---|
|  | Morgan Air                                  | Conditioning, LLC                               | •   |
| SUBJECT:                               |   | ted Liability Company                           |   |
|  | Amendment and fee(s) are sub                | -   |   |
|  | 1   | Bill Bassett                                    |   |
|  |   | Name of Person                                  |   |
|  |   |   |   |
|  |   |   |   |
|  |   |   |   |
|  | · · · · · · · · · · · · · · · · · · ·       | Address   |   |
|  | Crav  | wfordville, FL 3232                             | 7   |
|  | ·   |   |   |
|  | E-mail address: (t                          | o be used for future annual report notification |   |
| For further information of             | concerning this matter, please c            | all:  |   |
| Bill Bassett                           |   | at ( 850 921-8811                               | HASSE   |
| Name of Person                         |   | Area Code & Daytime Tele                        | phone Number  |
| Enclosed is a check for t              | he following amount:                        |   | 2: 07<br>STATE<br>LORIDA  |
| ■ \$25.00 Filing Fee                   | □\$30.00 Filing Fee & Certificate of Status | Certified Copy<br>(additional copy is enclosed) | □\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
|  |   | •   | ·   |
|  | ING ADDRESS:                                | STREET/COURIER A Registration Section           | DDRESS:   |

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

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassée, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Morgan Air Co   |  |  |  |   |
|---|--|--|--|---|
| (Name of the Limited Liability Com<br>(A Florida Limited  | nany as it now and<br>d Lizbility Company            | ears on our records.)                          |  |   |
| The Articles of Organization for this Limited Liability Compa<br>Florida document number 1.04000011605  | ny were filed on _                                   | 02/11/2004                                     | and assigned                                     |   |
| This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited li  | ability company l                                    | tere:  |  |   |
| The new name must be distinguishable and end with the words "L.L.C."  |  | ·  | "LLC" or the abbreviation                        |   |
| Enter new principal offices address, if applicable:   |  |  |  |   |
| (Principal office address MUST BE A STREET ADDRESS)   |  |  | ŽÝ.  | - |
| Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered registered agent and/or the new registered office address i  | office address o                                     | n our records, <u>enter</u>                    | 3 JUL 24 PH 2: 67                                |   |
| Name of New Registered Agent:   | Josu   | e Cabrera                                      |  |   |
| New Registered Office Address:  | tress: 14807 N 12th St  Enter Florida street address |  |  |   |
|   |  |  |  |   |
|   | Lutz   | , Florida                                      | 33549  |   |
| New Registered Agent's Signature, if changing Registered Age  | City<br>:nt;   |  | Zip Code   |   |
| I hereby accept the appointment as registered agent and a<br>the provisions of all statutes relative to the proper and co<br>accept the obligations of my position as registered agent<br>being filed to merely reflect a change in the registered off<br>company has been notified in writing of this change | mplete performan<br>as provided for in               | ice of my duties, and i<br>Chapter 608, F.S. O | I am familiar with and<br>r, if this document is |   |
| _   |  | Agent, Signature of New                        | Registered Asent                                 |   |
|   | <del>0 1 of 3</del>                                  |  |  | _ |

If amending the Managers or Managing 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 Title Type of Action Name Address 16002 Westview Cir Morgan, Brainard M **MGRM** Odessa, FL 33556 Remove Remove Remove Remove

|       | ding any other information, enter change(s) here: (Attach additional sheets, if necessary.) |  |
|-------|---|--|
|       |   |  |
|       |   |  |
| •••   |   |  |
|       |   |  |
|       |   |  |
| ***   | h-h-20-d 2012   |  |
| Dated | July ZZNO ZUIS  |  |
|       | TO TO   |  |
|       | Signature of a member or authorized representative of a member                              |  |
|       | Josue Cabrera (Manager)   |  |
|       | Typed or printed name of signee   |  |
|       | Page 3 of 3   |  |

Filing Fee: \$25.00

13 JUL 24 PM 2: 07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA