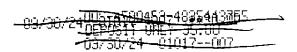
L04000028686



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



100437303641



09/30/24--01017--007 **35.00

Tat. MASSE BUT

COVER LETTER

| TO: | Registration Section of Corp | | | |
|----------------|------------------------------|---|---|---|
| SUBJE | ct: <u>fergus</u> | ion Marine Ser Name of Lim | Vices, Air Condition i | ng & Refrigeration, LLC |
| | | | • | |
| The enc | losed Articles of | Amendment and fee(s) are sub- | mitted for filing. | |
| Please r | eturn ali correspo | ndence concerning this matter | to the following: | |
| | | | Robert Ferguso. Name of Person | <u> </u> |
| | | ferguson Mari | ne Services, Air Co Firm/Company | enditioning Prefrigeration |
| | | 21515 | SW 91 Court | |
| | | | Address | |
| | | <u> </u> | 1er Bay FL 33 | 187 |
| | | | Only come and Dip over | |
| | | E-mail address: (| ergie 5 act. com | fication) |
| For furt | her information co | oncerning this matter, please ca | all: | |
| | nes Fes | S. Atra | | 5 3 <i>3 6</i> |
| | Name o | Person | at (305) 933-4 Area Code Daytim | c Telephone Number |
| Enclose | d is a check for th | e following amount: | | |
| □ \$ 25 | .00 Filing Fee | S30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| | Mailing Addres | | <u>Street Address:</u> Registration Se | · |

Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Vergeson Marine Services, Air Constitioning & Petrigeration, LLC (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 Liabilit | v Company were filed onA_ | cil 14, 2004 and assigned |
|--|--|---|
| Florida document number <u>LOY000028686</u> | | |
| This amendment is submitted to amend the following | | |
| A. If amending name, enter the new name of the | limited liability company here: | |
| The new name must be distinguishable and contain the words " | Limited Liability Company," the design | nation "LLC" or the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: | | |
| (Principal office address MUST BE A STREET AL | DDRESS) | |
| | | <u> </u> |
| | | 2 |
| Enter new mailing address, if applicable: | | 75 V) |
| (Mailing address MAY BE A POST OFFICE BOX | Ω | Kir E. |
| | | 1. C C |
| | | F. & |
| B. If amending the registered agent and/or regist agent and/or the new registered office address he | | rds, enter the name of the new registered |
| Name of New Registered Agent: | | |
| New Registered Office Address: | | |
| | Enter Florida | street address |
| _ | | , Florida Zip Colle |
| | City | Zip Colle |
| New Registered Agent's Signature, if changing Regis | tered Agent: | |
| I hereby accept the appointment as registered ag provisions of all statutes relative to the proper a accept the obligations of my position as registers being filed to merely reflect a change in the regis | nd complete performance of my ed agent as provided for in Cha | oduties, and I am familiar with and opter 605, F.S. Or, if this document is |

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

| Title | Name | Address | Type of Action |
|-----------------|--------------------------|-------------------------|----------------|
| mG RM | Beraldo Lugo | 5874 NW Leghorn Ave. | □Add |
| | | Pert St. Lucy FL. 34986 | SRemove |
| | | | Change |
| I <u>ng dim</u> | Carlisle E. Williams III | 5898 Qualberry Court | 🗆 Add |
| | | Loxahatchee, Fl 33470 | |
| | | | |
| | | | 🗀 Add |
| | | | □Remove |
| | | | Change |
| | | | 🗆 Add |
| | | | Remove |
| | | | Change |
| | | | □Add |
| | | | Remove |
| | | | Change |
| | | | □Adđ |
| | | | DRemove |
| | | | DChange |

|). 11 amen | ding any other information, enter change(s) here: (Attach additional sheets, if necessary.) |
|----------------|---|
| | |
| | • |
| | |
| | |
| | |
| | |
| | |
| | |
| - | |
| _ | |
| _ | |
| _ | |
| | |
| | |
| _ | |
| _ | |
| E. Effecti | ve date, if other than the date of filing: |
| Note: | If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ent's effective date on the Department of State's records. |
| If the record | d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ed. |
| Dated | 10-28-2074 |
| | Signature of a member or authorized representative of a member |
| | Rebust M. Ferguson |

Filing Fee: \$25.00