# 1050000 81495

(Requestor's Name)
(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:

Office Use Only



400330380724

06/10/19 4/10/12--016 \*\*25.6

LLC Arrend DC 19 6-22-19

19 JUN 10 AM 7: 59

# **COVER LETTER**

TO: Registration Division of C	i Section Corporations	•			
	OS COMFORT COO;ING LLC				
SUBJECT:  Name of Limited Liability Company					
The enclosed Articles	of Amendment and fee(s) are sub	mitted for filing.			
Please return all corre	spondence concerning this matter	to the following:			
	FRANCOIS CEDENO				
	CEDENOS COMFORT C	Name of Person OOLING LLC	<u></u>		
	20041SW 7041 AVE STE	Firm Company D14	<del></del>		
	DAVIE FL 33317	Address	<b></b>		
	FRANCOIS@CEDENOSC	City/State and Zip Code OMFORTCOOLING.COM			
		to be used for future annual report noti	fication)		
For further informatio	n concerning this matter, please co	all:			
FRANÇOIS CEDEN	O e of Person	954 473-2722 at ()	e Telephone Number		
13411	ic of Ferron	Mea Code Daynin	e receptoric rounter		
Enclosed is a check for	or the 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 ADDRESS: Registration Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

## STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 3230)

# ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION OF

#### CEDENOS COMFORT COOLINF 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 Liability Company were filed on  $\frac{8/18/2005}{2}$ and assigned Florida document number L05000081495 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 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 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 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 or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Actic
AMBR	BERNARDINA FRIAS CEDENO	2041 SW 70TH AVE STE D14 DAVIE FL 33317	
			m. r.
			☐ Change
			<b>5</b>
			<del></del>
			□ Change
			□ Add
			Remove
			Change
<del></del>			□ Add
			☐ Remove
			☐ Change
<del></del>			
			Remove
			Change
<del></del>			Add
			D Remove
			□ Change

-	
<u> </u>	
<u></u>	
ffective date, if o	ther than the date of filing: (optional)
	sted, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 serted in this block does not meet the applicable statutory filing requirements, this date will not be listed a
	e date on the Department of State's records.
	es a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier
The 90th day a	after the record is filed.
HINE TOU	7010
ated	2019
	I lane à
	I lavec
	Signature of a member or authorized representative of a member
FRANCO	DIS CEDENO
-	Typed or printed name of signee

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Page 3 of 3

Filing Fee: \$25.00