L05000104662

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
<u> </u>		•

Office Use Only



000283920090

03/30/16--01024--018 **113.75



APR 0 8 2016

3 MASON



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 31, 2016

MICHAEL L. HANEY SR. 417 MCKENZIE ROAD CANTONMENT, FL 32533

SUBJECT: M-3 AIR CONDITIONING SERVICES, LLC

Ref. Number: L05000104662

We have received your document for M-3 AIR CONDITIONING SERVICES, LLC and your check(s) totaling \$113.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 516A00006652

Stacey M Mason Regulatory Specialist II

www.sunbiz.org

COVER LETTER

TO:	Registration Section Division of Corporations
SUBJE	ECT: M-3 AIR CONDITIONING SERVICES LLC Name of Limited Liability Company
	•
The end	closed Articles of Amendment and fee(s) are submitted for filing.
Please 1	return all correspondence concerning this matter to the following:
	MICHAEL L. HANEY Name of Person M-3 AIR CONDITIONING SERVICES LLC Firm/Company
	M-3 AIR CONDITIONING SERVICES LLC
	417 MCKENZIERD Address
	CANTONMENT FL. 32533 City/State and Zip Code
	E-mail address: (to be used for future annual report notification)
For fur	ther information concerning this matter, please call:
_M	ICHAEL HAWEY at (850) 698 - 2825 Name of Person Area Code Daytime Telephone Number
Enclose	ed is a check for the following amount:
□ \$25	5.00 Filing Fee \$\Bigcup \\$30.00 Filing Fee & \Bigcup \\$55.00 Filing Fee & \Certificate of Status & \Certified Copy & \Certificate of Status & \Certified Copy & \Certified Co

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 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

M-3	AIR	COND	TION	11V6	SERVICE	5 LLC
(N	ame of the	Limited Liabilit	ly Company a:	s it now appe	urs on our records.)	
_		(A Florida	Limited Liabi	lity Company)		

The Articles of Organization for this Limited Liability Company were filed on <u>CCIDBEK 25^{4 x} 2005</u> and assigned Florida document number <u>LOS OOD 10 4 6 6 Z</u>.

This amendment is submitted to amend the following:

A.	If amending	name, enter	the new	name of the	limited lia	ibility con	ipany	here

			City	,	`	in Cada	
				. Florida	ì		
- 12			Enter Florida str	eet address			
New R	egistered Office Address:						<u></u>
Name ·	of New Registered Agent:		· · · · · · · · · · · · · · · · · · ·				
	t and/or the new registered of		uuui ega on oui				V
B. If amendir	ng the registered agent and	or registered office	address on our	records, en	ter the	name (of the ne
		_					
(Mailing addres	<u>s MAY BE A POST OFFICE</u>	<u>BOX)</u>			_ ਉੱਜੀ	.0	
	ing address, if applicable:		1		`SĞ	+	
Cutou norr mall	ing address if applies bloc				OF S	U	
		_			Mã		111
1 Timespile Office					55.¥	- 	p
•	address MUST BE A STREE				, 20 , 20	3	4 1
Enter new prin	cipal offices address, if applic	able:			~ <u></u>	2016	F8 777

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 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

Title	<u>Name</u>	Address	Type of Action
MGR	MATHEW BRYCE HANCY	SOG GREENBELRY DR. CANTONMENT, FL. 32533	Add
			□ Remove
			Change
		•	□ Remove
		•	Change
		<u> </u>	□ Remove
			Change
			□ Add
			Remove
			Change
			□ Add
			Remove
		CRET NAME OF THE PROPERTY OF T	Change Change Change Change
		SSEF.	_GRemov
		FLORID.	Change

MICHAEL	<u> </u>	HANEY	WILL	OWN	30%	OF	LLC
MATHEW							
ANGELA	117.	HAIDEY	WILL	DWM	50%	of	LLC
				•			
			<u> </u>				
				·			
	·		-	•			
			— — — — — — — — — — — — — — — — — — —				
							
68		- · · · · · · · · · · · · · · · · · · ·		•			
				•			
				•			
tive date, if oth	er than	the date of filin	ık:	1		(op	tional)
: If the date insert	ted in th	iis block does not	meet the appl	or to date of fili icable statuto	ng or more than ry filing require	(op 90 days aft ements, th	tional) er filing.) Pursuant nis date will not b
: If the date insert	ted in th	iis block does not	meet the appl	or to date of fili icable statuto	ng or more than ry filing require	(op 90 days aft ements, th	tional) er filing.) Pursuant nis date will not b
i If the date insert ment's effective da ecord specifies	ted in thate on the	nis block does not the Department of ayed effective	meet the appl State's record date, but r	or to date of fili icable statutor is.	ry filing require	ements, th	nis date will not b
i If the date insert ment's effective date ecord specifies	ted in thate on the	nis block does not the Department of ayed effective	meet the appl State's record date, but r	or to date of fili icable statutor is.	ry filing require	ements, th	nis date will not b
: If the date insert ment's effective da ecord specifies e 90th day aft	ted in thate on the	nis block does not the Department of ayed effective record is filed	meet the appl State's record date, but r	or to date of fili icable statuto is. not an effec	ry filing require	ements, th	nis date will not b
: If the date insert ment's effective da ecord specifies e 90th day aft	ted in thate on the ate on the ate on the ate on the ate of the at	nis block does not the Department of ayed effective record is filed	meet the appl State's record date, but r	or to date of fili icable statuto is. not an effec	ry filing require	ements, th	nis date will not b
etive date, if other effective date is listed: If the date insert ment's effective date decord specifies are 90th day after the	ted in thate on the ate on the ate on the ate on the ate of the at	ais block does not the Department of ayed effective record is filed	meet the appl State's record date, but r	or to date of filiticable statutories.	ry filing require	t 12:01	a.m. on the
If the date insert ment's effective date ecord specifies to 90th day after the ecord specifies of the ecord specif	a dela er the	ais block does not the Department of ayed effective record is filed Signature of a	date, but r	or to date of filinicable statutorists. not an effection thorized representation of the statutorists and the statutorists are statutorists.	entative of a mer	t 12:01	a.m. on the
If the date insert ment's effective date ecord specifies a 90th day after the APKIL	a dela er the	ais block does not the Department of ayed effective record is filed	date, but r	or to date of filiticable statutories. not an effect	entative of a mer	t 12:01	a.m. on the
If the date insert ment's effective date ecord specifies a 90th day after da	a dela er the	ais block does not the Department of ayed effective record is filed Signature of a	date, but r	or to date of filinicable statutorists. not an effection thorized representation of the statutorists and the statutorists are statutorists.	entative of a mer	t 12:01	nis date will not b