

LOB 0000045786

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

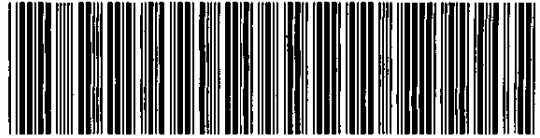
LOB-45786

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

W. G. G. MAY - 7 2008

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Ozone AC Services LLC
(Name of Limited Liability Company)

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Lynessa Ahmad
(Name of Person)

Ozone AC Services LLC
(Firm/Company)

1474 NE 48th Court
(Address)

Pompano Beach FL 33064
(City/State and Zip Code)

For further information concerning this matter, please call:

Lynessa Ahmad at (954) 549-7955
(Name of Person) (Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 25, 2008

LYNESHA AHMAD
1474 NE 48TH COURT
POMPANO BEACH, FL 33064

SUBJECT: OZONE AC SERVICES LLC
Ref. Number: L06000045786

We have received your document for OZONE AC SERVICES LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current Registered Agent information does not match our records.

The registered agent must sign accepting the designation.

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) 245-6067.

Neysa Culligan
Document Specialist

Letter Number: 108A00025230

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR
BOTH FOR LIMITED LIABILITY COMPANY**

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the limited liability company is: Ozone AC Services LLC
2. The mailing address of the limited liability company is: 1474 NE 48th Court
Pompano Beach, FL 33064
- 05/02/2006 206000045786
3. Date of filing/registration in Florida 4. Document number
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Lynessa Ahmad
Name
735 Tivoli Circle #101
Address
Deerfield Beach, FL 33441
City, State and Zip

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TALLAHASSEE FLORIDA

6. The name and address of the new registered agent and/or office:

Lynessa Ahmad
Name
1474 NE 48th Court
Florida street address (P.O. Box NOT acceptable)
Pompano Bch, FL 33064
City, State and Zip

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Lynessa Ahmad
(Signature of a member or authorized representative of a member)

Lynessa Ahmad
(Printed or typed name of signee)

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 608, 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.

Lynessa Ahmad
(Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
FILING FEE: \$25.00