LU6000088238

(Re	equestor's Name)		
(Ad	dress)		
(Ad	ldress)		
(Cit	ry/State/Zip/Phon	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	isiness Entity Nar	пе)	
(Document Number)			
Certified Copies	_ Certificates	s of Status	
Special Instructions to	Filing Officer:		
·		İ	

Office Use Only



600184962856

09/07/10--01022--025 **25.00

10 SEP -7 PH 44 45

B. KOHR

SEP - 9 2010

EXAMINER

COVER LETTER

TO;

Registration Section

Division of Co	rporations		9. L. G.
	El Clean A	Air Solutions LLC	6
SUBJECT:		ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sul	omitted for filing.	OSER, A.
Please return all corresp	ondence concerning this matter	to the following:	•
		Michael Carino	
	Michael Farina		
		Name of Person	
	FI C	Clean Air Solutions LLC	
		Firm/Company	
		Address	
		Deltona, FI 32725	
		City/State and Zip Code	
		shifari@yahoo,com	
	E-mail address: (to be used for future annual report no	tification)
For further information	concerning this matter, please of	call:	
3.4	ishaal Farina	200	700 2200
	ichael Farina of Person	at (386)	789-2300 ime Telephone Number
Nane	or reison .	Alça Code de Daye	and receptore Nation
Enclosed is a check for	the following amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee &	\$55.00 Filing Fee &	\$60.00 Filing Fee,
y \$23.00 1 milg 1 cc	Certificate of Status	Certified Copy (additional copy is enclos	Certificate of Status &
MAII	LING ADDRESS:	STREET/COU	RIER ADDRESS:
	tration Section	· Registration Sec	
	ion of Corporations	Division of Corp	
	Box 6327 nassee, FL 32314	Clifton Building 2661 Executive	
i anai	143500, 1 D 343 l T	Tallahassee, FL	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

A]	R CARE AIR C	OND. & HEATING LLC		
(Name of the Limite	<u>d Liability Compa</u> A Florida Limited I	ny as it now appears on our Liability Company) 9/8/2006	records.)	رن
				10°C.
The Articles of Organization for this Limited	Liability Company	were filed on $\frac{10/1/2}{2}$	2006	and assigned
Florida document numberL0600008				
				ار م
This amendment is submitted to amend the following	llowing:			and assigned
A. If amending name, enter the new name	of the limited liab	ility company here:		\$
	AN AIR SOLUT			
The new name must be distinguishable and end w "L.L.C."	ith the words "Limi	ted Liability Company," the	designation "L	LC" or the abbreviation
Enter new principal offices address, if applicable:		1176 North Brickell Drive		
(Principal office address MUST BE A STRE	ET ADDRESS)	Deltona, FI 32725		
Enter new mailing address, if applicable:		PO Box 740281		
(Mailing address MAY BE A POST OFFICE BOX)		Orange City, FI 3277	74-0281	
B. If amending the registered agent and			rds, <u>enter t</u>	he name of the nev
registered agent and/or the new registered of	office address her	<u>e</u> :		
	Michael Farina			
Name of New Registered Agent:				
Name of New Registered Agent: New Registered Office Address:		Brickell Drive		
		Brickell Drive	da street addi	ress
		Brickell Drive Enter Flori	da street addi	ress 32725

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 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.

If Changing Registered Agent, Signature of New Registered Agent

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	<u>Name</u>	<u>Address</u>	Type of Action
mgr	Michael Farina	1176 North Brickell Drive Deltona, Fl 32725	✓ Add Remove
mgr	Hugh Farina	1268 Doris Street Orange City, Fl 32763	☑ Add ☐ Remove
mgrm	Shirley Farina	1176 North Brickell Drive Deltona, Fl 32725	Add Remove
<u> </u>			Add Remove
			Add Remove
			Add Remove
D. Ifam	ending any other information, e	nter change(s) here: (Attach additional sheets, if necessary.)	
			_
			_
Dated	Signature of	of a member or authorized representative of a member	
		Michael Farina Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00