L07000098452

500139458085

01/12/09--01024--008   **25.00

FILED
09 JAN 12 PM 4:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

S. HAWKES

JAN 1 3 2009

EXAMINER

# COVER LETTER

**TO:** Registration Section
Division of Corporations

SUBJECT: AMI-HEAT ENGINEERING LLC
*(Name of Limited Liability Company)*

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

_Michael Lasaia_
(Name of Person)

_incSmart.biz, inc._
(Firm/Company)

_4431 Edward Ave_
(Address)

_Las Vegas, nv 89108_
(City/State and Zip Code)

For further information concerning this matter, please call:

_Michael Lasaia_ at (702) 334-0391
(Name of Person)     (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☑ $25.00 Filing Fee    ☐$30.00 Filing Fee &     ☐$55.00 Filing Fee &     ☐$60.00 Filing Fee,
                         Certificate of Status     Certified Copy              Certificate of Status &
                                                   (additional copy is enclosed)   Certified Copy
                                                                                    (additional copy is enclosed)

**MAILING ADDRESS:**                    **STREET/COURIER ADDRESS:**
Registration Section                    Registration Section
Division of Corporations                Division of Corporations
P.O. Box 6327                           Clifton Building
Tallahassee, FL 32314                   2661 Executive Center Circle
                                        Tallahassee, FL 32301

# ARTICLES OF AMENDMENT
# TO
# ARTICLES OF ORGANIZATION
# OF

AMI-HEAT ENGINEERING 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 09/26/2007 and assigned

Florida document number L07000098452 .

This amendment is submitted to amend the following:

**A. If amending name, <u>enter the new name of the limited liability company here</u>:**

_____

The new name must be distinguishable and end with 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, <u>enter the name of the new</u> registered agent and/or the new registered office address here:**

<u>Name of New Registered Agent</u>: _____

<u>New Registered Office Address</u>: _____
*(Enter Florida street address)*

_____, **Florida** _____
*(City)* *(Zip Code)*

**<u>New Registered Agent's Signature, if changing Registered Agent</u>:**

*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, <u>Signature of New Registered Agent</u>)**

**Page 1 of 2**

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 | Name | Address | Type of Action |
|---|---|---|---|
| MGR | ARI NIR | 74 WHEELER AVENUE, APT. 2 PLEASANTVILLE NY 10570 | ☐ Add ☑ Remove |
| MGR | OREN NIR | 74 WHEELER AVENUE, APT. 2 PLEASANTVILLE NY 10570 | ☑ Add ☐ Remove |
| | | | ☐ Add ☐ Remove |
| | | | ☐ Add ☐ Remove |
| | | | ☐ Add ☐ Remove |
| | | | ☐ Add ☐ Remove |

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

Dated _JANUARY 6_, _2009_.

_Oren Nir_
Signature of a member or authorized representative of a member

_OREN NIR_
Typed or printed name of signee

**Page 2 of 2**

**Filing Fee: $25.00**