L07000101821

(Re	equestor's Name)	
(Ad	ldress)	
· (Ad	dress)	
(Cit	ty/State/Zip/Phone	» #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		!

Office Use Only



600113424456

12/31/07--01041--006 **60.00

SECRETARY OF STATE

D. BRUCE
DEC \$1 2007
EXAMINER

COVER LETTER

Division of Corporations	
SUBJECT: Martins Heating and Air Conditioning, 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:	
Patricia Dick	
(Name of Person)	_
(Firm/Company)	_
2746 CE Engle Divive	O7 C
2716 SE Eagle Dirive (Address)	DEC LAHA
	SSE 3
Port Saint Lucie Florida 34984 (City/State and Zip Code)	
	PH 4: 40 OF STATE E.FLORID
For further information concerning this matter, please call:	
Patricia Dick at (772) 370-5649	
(Name of Person) (Area Code & Daytime Telephone Number	ber)
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$\ \text{Solution}\$\$\$ \$30.00 Filing Fee & \$\ \text{Certificate of Status}\$\$\$ Certified Copy (additional copy is enclosed) \$\text{Certified}\$\$ Certified Copy (additional copy is enclosed)	riling Fee, cate of Status & ed Copy onal copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS: Registration Section

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited I	Liability Company as it now appear: Florida Limited Liability Company)	s on our records.)		
)				
The Articles of Organization for this Limited Lia	bility Company were filed on Oct	ober 8, 2007	and assign	ed
Florida document number <u>L07000101821</u>		•	07 DI SECT	
This amendment is submitted to amend the follow	ving:		RETARY AHASSEI	
A. If amending name, enter the new name of t	the limited liability company here	<u>2</u> :	PH 4: LI OF STATE E. FLORI	
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Compar	ny," the designation "LI	or the abbr	reviation
B. If amending the registered agent and/or registered agent and/or the new registered offi		ur records, <u>enter th</u>	e name of t	he new
Name of New Registered Agent:	Michael Benedict			
New Registered Office Address:	New Registered Office Address: 9500 Satelitte Blvd Suite #200 (Enter Florida street address)			
	Orlando (City)	, Florida <u>32</u>	837 (Zip Code)	
	(0.9)		(-2-)	

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> **Type of Action** Address MGR Michael Benedict 3787 Oleander Avenue ☐ Add √ Remove Fort Pierce, Florida 34982. Michael P Hubbard MGR 1055 SE Holbrook Court Bay # 3 Port Saint Lucie Florida 34952 ✓ Add Remove MGRM_ MGRM Rachel Dick 9500 Satelitte Blvd Suite #200 **✓** Add Orlando, Florida, 32837 Remove Add Remove □Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 2007 Dated Signature of a member or authorized representative of a member

Typed or printed name of signee
Page 2 of 2

Michael Hubbard

Filing Fee: \$25.00