LOTUL 115179

| (Requestor's Name) | | | |
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| (City/State/Zip/Phone #) | | | |
| PICK-UP WAIT MAIL | | | |
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| (Business Entity Name) | | | |
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| (Document Number) | | | |
| ertified Copies Certificates of Status | | | |
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| Special Instructions to Filing Officer: | | | |
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Office Use Only



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COVER LETTER

| TO: Registration Section Division of Corporations | | |
|---|---|---|
| SUBJECT: Air Quality Man Name of Limi | NAGEMENT SERVICES ted Librility Company | s, LLC |
| The enclosed Articles of Amendment and fee(s) are sub- | nitted for filing. | |
| Please return all correspondence concerning this matter t | to the following: | |
| CONSTA | Name of Person | <u> </u> |
| Ain Quelit | y yauaconent Se Firm/Containy | envices, (C |
| P.o. | Box 20635 Address | |
| Butdent | City/State and Zip Code | |
| Countes: (t | o be used for future annual report notific | ation) |
| For further information concerning this matter, please ca | ill: | |
| Donald M. Bickford Name of Person | | Telephone Number |
| Enclosed is a check for the following amount: | | |
| 25.00 Filing Fee \$\(\sum \text{Certificate of Status}\) | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| Mailing Address: Registration Section | <u>Street Address:</u> Registration Sect | ion |

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Tank & T

| AIR QUALITY MANAGEMEN (Name of the Limited Liability Compa (A Florida Limited | it Sorvices, LC | • |
|--|--|----------------------|
| (Same of the Lamited Labitary Compa (A Florida Limited | Liability Company) Deep SEP = 3 PH 2: | 14 |
| The Articles of Organization for this Limited Liability Company Florida document number | were filed on | TE_ and assigned |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limited-liah | ility company here: | |
| N/A | | |
| The new name must be distinguishable and contain the words "Limited Liabi | lity Company," the designation "LLC" or the a | bbreviation "L.L.C." |
| Enter new principal offices address, if applicable: | 6829 74th ST. Cincl | le E |
| (Principal office address MUST BE A STREET ADDRESS) | Bridenton, A. | 34203 |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | P.O. Box 20635 Bicadenton, FL 39 | Y204 |
| B. If amending the registered agent and/or registered office : agent and/or the new registered office address here: | | |
| Name of New Registered Agent: | ustance M. Bickfi | ond |
| New Registered Office Address: 6829 | 74 ⁴ ST. Cincle E Enter Florida street address | |
| B024d | enton . Florida | 34203 Zin Code |
| Non-Designation Association (Colombian Designation Association Designation Association Designation (Colombian Designation Desi | * | ing come |

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 = M $AMBR = A$ | lanager Authorized Member | | |
|--|------------------------------|------------------------|----------------|
| <u>Title</u> | <u>Name</u> | Address | Type of Action |
| MGRM | Dylan J. Bickford | 8176 MATURES WAY 7-34 | DAdd |
| | | Bridenton, FL 34202 | |
| | | · | □ Change |
| MGRM | Constance M. Bickford | 6829 74th St. cincle E | X Add |
| | | Brudenton, FL 34203 | □Remove |
| | | | (hange |
| AMBR | DONALD M. B. CKFORD | 6829 24th ST. Circle E | □Add |
| | | Bradenton, FL 34203 | □Remove |
| | | | Change |
| | | | 🗆 Add |
| | | | □Remove |
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| | | | □Change |

| D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) |
|--|
| Reorganization of the LLC to Remove Dyland J. |
| Bickford as A MADORITY MAURGING MEMBER (MGRM) |
| STEPPING DOWN. CONSTANCE M. BICKFORD WILL MOVE |
| Into the UC is the (MGRM) owing 90% of |
| Ain Quality Management Services, LC and Douxld |
| M. Bickford AS (AMBR) owning 1090 of Air Quality |
| Management Services, LLC. |
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| E. Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. |
| If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (h) The 90th day after the record is filed. |
| Dated 8/24 2024. Signature of a member or authorized epiesentative of a member Douald M. B. CK Ford Typed or primed name of signee |

E:::-- E--- C35 00