

107000125807

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

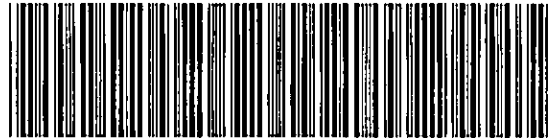
(Document Number)

Certified Copies _____ Certificates of Status _____

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2018 JUL 23 AM 8:05
OFFICE OF THE CLERK
JUL 24 2018

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JUL 24 2018



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 4, 2018

CARLOS SOCARRAS
20200 SW 190 ST
MIAMI, FL 33187

SUBJECT: NATIONAL AIR AND HEAT LLC
Ref. Number: L07000125807

We have received your document for NATIONAL AIR AND HEAT LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Corporation, but your entity is a LLC. Please complete and return the enclosed blank form(s).

Please return the corrected original and one copy of 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) 245-6051.

Brittany M Figueroa
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 618A00011531

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ARTHEA
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CLAHASS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: National Air and Heat, 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:

Carlos Socarras
Name of Person

National Air and Heat
Firm/Company

20200 SW 190 St
Address

Miami, FL 33187
City/State and Zip Code

Shari @ National Air and Heat . com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Shari Sanchez at (305) 595 2665
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|---|--|--|--|

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

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

National Air and Heat LLC

Page 1 of 3

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 = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR TAR	Pedro Puentes	20200 SW 1905+	<input type="checkbox"/> Add
		miami FL 33187	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated 6 / 12 . 2018

Signature of a member or authorized representative of a member

carlos Socarras
Typed or printed name of signee