L07000127627

(Requestor's Name)	_				
(Requestors Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)	_				
PICK-UP WAIT MAIL					
(Business Entity Name)	_				
LO7-127627					
(Document Number)					
Certified Copies Certificates of Status					
· ·					
Canaial Instructions to Filips Office	٦				
Special Instructions to Filing Office					
	-				
,					
	_				

Office Use Only



700129441807

05/15/08--01009--004 ++25.00



Nt. Cuttoma JUN - 3 2008

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: INDOUR AIR QUALITY CONTROL SYSTEMS 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:
INDOUR AIR DUALITY CONTROL SYSTMYS LAC. (Firm/Company)
(Address) (City/State and Zip Code)
For further information concerning this matter, please call:
Manufosepii Peconano at (407) 361-9969 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount: Pd.
\$25.00 Filing Fee \$\square\$\$\$55.00 Filing Fee & \$\square\$\$\$\$\$60.00 Filing Fee,

MAILING ADDRESS:

Certificate of Status

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

STREET/COURIER ADDRESS:

Certificate of Status & Certified Copy

(additional copy is enclosed)

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

Certified Copy (additional copy is enclosed)



May 16, 2008

JOSEPH PECORARO 1967 S. ALAFAYA TRAIL UNIT 144 ORLANDO, FL 32828

SUBJECT: INDOOR AIR QUALITY CONTROL SYSTEMS, LLC

Ref. Number: L07000127627

We have received your document for INDOOR AIR QUALITY CONTROL SYSTEMS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

I am enclosing an amendment form for your convenience.

Please return 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) 245-6067.

Neysa Culligan Document Specialist

Letter Number: 608A00031316

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

08 JUN -3 AM 10: 03
SECRETARY OF STATE
TALLAHASSEE FLORIDA

imited 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 _ Florida document number / 0700127627 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 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) 714 N. GOLDENROD RD C 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, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: (City), Florida 32828 (Zin Code)

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 = Ma MGRM = 1	anager Managing Member			
<u>Title</u>	<u>Name</u>	Address	, , , , , , , , , , , , , , , , , , ,	Type of Action
MGRM	1 Joseph Peconan	0 1969 5 Azi	22828 F	Add Remove
MGRM	PETER PERONA	19695.ALA GALANDO.	FAYA 129, #144 6232828	Add Remove
MG MM	Unsan PRECHANI	0 1969 S. AZAR OMENDO, EL	141 1 1AIL & 1443 38878	Add Remove
			· 	Add Remove
] Add] Remove
				Add Remove
D. If amen	ding any other information, enter o	change(s) here: (Attach addition	al sheets, if necessary.)	
<u>.</u> _			TALL!	08 7
Dated	5.29-2008))	AWASSEE FLORID	الاستداد ا
	Joseph	rember or authorized representative of the control	of a member	

Page 2 of 2

Filing Fee: \$25.00