## L09000001436

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SECRETARY OF STATE

T. CLINE

FEB 16 2009

EXAMMER

## **COVER LETTER**

:

SUBJECT: Airflow S	E				
The enclosed Articles of A	mendment and fee(s) are subn	nitted for filing.			
Please return all correspond	dence concerning this matter to	o the following:			
	James A. Byrne, Esquire				
		(Name of Person)			
		(Firm/Company)			
	540 - 4th Street North	(Address)			
	St. Petersburg, FL 33701	(City/State and Zip Code)			
		(City/State and Zip Code)			
For further information cor	ncerning this matter, please ca	II:		2009 FI	ETTE,
James A. Byrne		at ( 727 ) 898-3273		监盟	Chester.
(Name of	Person)	(Area Code & Daytime T	elephone Number)	ARY OF STATE	
Enclosed is a check for the	following amount:			COF TO:	* Ne gall*
☑ \$25.00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &	

MAILING ADDRESS:

Registration Section Division of Corporations

TO:

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Airflow Systems of North & South America, 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 January 6, 2009 and assigned Florida document number L09000001436 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." 7305 Lincoln Park Lane Enter new principal offices address, if applicable: Port Richey, FL 34668 (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, enter the name of the new registered agent and/or the new registered office address here: Howard Michael Houk Name of New Registered Agent: 7305 Lincoln Park Lane New Registered Office Address: (Enter Florida street address) Port Richey (City)

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.

Changing Registered Agent, Signature of New Registered Agent

Page 1 of 2

'If aniending 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 **Type of Action** <u>Address</u> <u>Title</u> <u>Name</u> MGR Howard Michael Houk 7305 Lincoln Park Lane Add Add Remove Port Richey, FL 34668 ☐ Add Remove Add 🗂 ☐ Add Remove 🗖 Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated signature of a member or authorized representative of a member berald W Parks Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00