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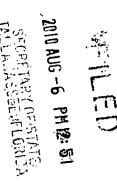
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C. LEWIS

AUG - 9 2010

EXAMINER

COVER LETTER

TO: Registratio Division of	n Section Corporations
SUBJECT: AIR	BENDER HEATING + AIR CONDITIONING SERVICES LLC
	Name of Limited Liability Company
The enclosed Article	s of Amendment and fee(s) are submitted for filing.
	espondence concerning this matter to the following:
	ELISE T. PHILLIPS CPA Name of Person
	ELLISE T. PHILLIPS CPA PA Firm/Company
	P.O. Box 91 Address
	DELAND FL 32721-0091 City/State and Zip Code
For further informati	E-mail address: (to be used for future annual report notification) on concerning this matter, please call:
ELISE	T. PHILLIPS CPA at (386) 785 - 0466 me of Person Area Code & Daytime Telephone Number
Enclosed is a check \$25.00 Filing Fed	for the following amount: \$30.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

OF

FILED

2010 AUG -6 PH 12: 61

AIRBENDER HEATING TAIR CONDITIONING STORE TARY OF STATE (Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

(A Florida Limited Lia	ibility Company)
The Articles of Organization for this Limited Liability Company w	vere filed on July 15, 2010 and assigned
Florida document number <u>L 10 0000 74754</u> .	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	ty company here:
The new name must be distinguishable and end with the words "Limite "L.L.C."	d Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	- NO CHANGE -
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	- NO CHANGE-
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:	
Name of New Registered Agent:	-NO CHANGE -
New Registered Office Address:	
	Enter Florida street address
·	, Florida
	City Tin Coda

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 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 **Type of Action** <u>Address</u> <u>Title</u> <u>Name</u> NO CHANGES -☐ Add ☐ Remove 🗌 Add Remove ☐ Add Remove Remove ∐Add Remove \square Add 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 Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00