## [10000/23617

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SECRETARY OF STATE



J. BRYAN

APR 15 2011

**EXAMINER** 

## **COVER LETTER**

TO:	Registration S Division of Co			•	•
SUBJE	ECT:		Central Florida LLC	<del></del>	
		Name of Lim	ited Liability Company		
The en	closed Articles o	of Amendment and fee(s) are su	bmitted for filing.		
Please	return all corresp	oondence concerning this matte	r to the following:		,
		•			·
			Robert Werner Name of Person		
			Tunio of Foldon		For 3
			Air of Central Florida LLC		50 西加州
			Firm/Company		芸ュー
			PO BOX 903		
			Address		DF S
			Belleview FL 34421		FE STATE
			City/State and Zip Code		. <del></del>
			werner5@yahoo.com		
		E-mail address: (	to be used for future annual report notifi	ication)	
For fur	ther information	concerning this matter, please	call:		
		obert Werner	at (	233-5135	
	Name	of Person	Area Code & Daytime	e Telephone Numbe	r
Enclose	ed is a check for	the following amount:			
<b>\$25</b> .	00 Filing Fee	✓ \$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	) Certified	te of Status &

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



## FLORIDA DEPARTMENT OF STATE Division of Corporations

April 8, 2011

ROBERT WERNER COOL AIR OF CENTRAL FLORIDA LLC PO BOX 903 BELLEVIEW, FL 34421

SUBJECT: COOL AIR OF CENTRAL FLORIDA, LLC

Ref. Number: L10000123617



Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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) 245-6043.

Joey Bryan Regulatory Specialist II

Letter Number: 411A00008558

Control of the Contro

Cheas rawing your deperment, along triting a popy of this latter. This obligious or your false our aid in a observance.

and the control of th

www.sunbiz.org

## **ARTICLES OF AMENDMENT.** · TO ARTICLES OF ORGANIZATION **OF**

COOL AIR OF CENTRAL FLOR			
(Name of the Limited Liability Co (A Florida Limi	mpany as it now appears on our records.) ted Liability Company)		
The Articles of Organization for this Limited Liability Complete L10000123617  L1000123617	pany were filed onDecember 1, 2010 and assigned		
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 "L.L.C."	Limited Liability Company," the designation "LLC" or the abbreviation		
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRES.	S) = ==================================		
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered agent and/or the new registered office address	d office address on our records, enter the name of the new here:		
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	Enter Florida street address		
	Enter Florida street address, Florida		

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 of Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member **Type of Action Title** <u>Address</u> Name 1 Robert F Werner MGRM PO Box 903 Belleview FL 34421 William T Lewter MGRM 5741 SW 61 PL Ocala FL 34474 ☐ Add Remove Add Remove ∏Add Remove  $\square$ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) April 4 Dated Signature of a member or authorized representative of a member Robert F Werner Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00