

L110000099 718

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

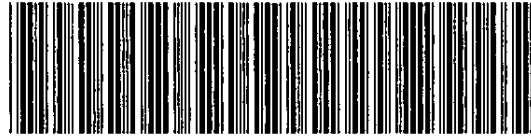
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JUL 19 2012
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07/18/12--01015--009 **25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 JUL 18 PM 1:34

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: R & G AIRCONDITIONING AND REFRIGERATION, LLC
Name of Limited Liability Company

RECEIVED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 JUL 18 PM 1:34

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

GUSTAVO DIAZ

Name of Person

R & G AIRCONDITIONING AND REFRIGERATION, LLC

Firm/Company

PO Box 941683

Address

MIAMI, FL 33194

City/State and Zip Code

randgairandrefrigeration@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

GUSTAVO DIAZ

Name of Person

at (786) 366-6436

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" 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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

R & G AIRCONDITIONING AND REFRIGERATION, 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 08/30/2012 and assigned

Florida document number L11000099718.

RECEIVED STATE
SECRETARY OF
CORPORATION
DIVISION
JUL 18 11:31 AM '12

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)

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:

Enter Florida street address

_____, Florida _____
City Zip 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 = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	RAY WARREN	2001 GRANADA DR COCONO CREEK FL 33066	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove ✓
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

CORRECT FEIN - 453136222

Dated 7-12-2012

Signature of a member or authorized representative of a member

GUS DIAZ

Typed or printed name of signer