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12/02/13--01042--016 **25.00



J. Shivers DEC 0 3 2019



COVER LETTER

Division of Corporations	
SUBJECT: 2 & G. AIR CONDITIONING And Refrigeration 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:	
Gustavo Diaz Name of Person	_
R&G AIR CONDITIONING And Refugenation 240	_
P.O. Bex 941683 Address	
MIAMI FL 33194 City/State and Zip Code	
City/State and Zip Code	
RAND & AIR AND Refu genation & YAhao-com E-man address: (to be used for future annual report notification)	?". C
For further information concerning this matter, please call:	÷
Gus HAvo DIAZ at (786) 366-6436 Name of Person Area Code & Daytime Telephone Number:	i
Name of Person Area Code & Daytime Telephone Number.	
Enclosed is a check for the following amount:	
\$25.00 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	

MAILING ADDRESS:

TO:

Registration Section

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 AIR Coult	aumy An	d Refn	Hannah	ou LLC		
(Name of the Limited Liability Comps (A Florida Limited	any as it now appea Liability Company)	ers on our reco	rdhe.)	<u></u>		
The Articles of Organization for this Limited Liability Company Florida document number			,			
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the limited lial	•					
The new name must be distinguishable and end with the words "Lim"L.L.C."						
Enter new principal offices address, if applicable:	/320	3 D. Gustles	IXIE A	tuy 3	1. Z4 —	
(Principal office address MUST BE A STREET ADDRESS)	Conul	Gubles	FL	33146		
Enter new mailing address, if applicable:			The state of the s	# 00 yr	_	
(Mailing address MAY BE A POST OFFICE BOX)				70 -	_	
B. If amending the registered agent and/or registered o	office address on	our records	enter the	name of the		
registered agent and/or the new registered office address he		our records,	30	nagic of the	<u>ucw</u>	
Name of New Registered Agent:					_	
New Registered Office Address:	New Registered Office Address: Enter Florida street address					
	, Florida					
	City		Z	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 amegding the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member **Address** Title **Type of Action** <u>Name</u> BRIAN Abraham 1320 5 DIKIE Huy Add Remove Remove Remove Remove

. If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
ted	11/26/13
	Signature of a member of authorized representative of a member
	Grus D142
	Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00