

L120000 27853

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

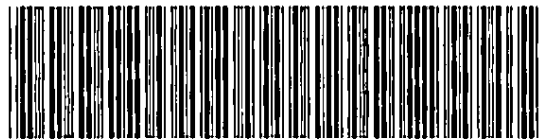
(Business Entity Name)

(Document Number)

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O. SIMMONS  
DEC 10 2018

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Air Waves Heating & Cooling, 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:

Jennifer Epperson

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Firm/Company

13230 Maryweather Court

\_\_\_\_\_  
Address

Jacksonville, FL 32225

\_\_\_\_\_  
City/State and Zip Code

Jennifer@airwavesjax.com

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

For further information concerning this matter, please call:

Jennifer Epperson

at ( 904 ) 697-6313

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☒ \$30.00 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$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



If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager  
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Donald Tipton	PO Box 49277	<input type="checkbox"/> Add
		Jacksonville Beach, FL 32240	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Terry Tipton	PO Box 49277	<input type="checkbox"/> Add
		Jacksonville Beach, FL 32240	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated December 4, 2018

Jennifer Epper  
Signature of a member or authorized representative of a member

Typed or printed name of signee