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N. Culligan MAR - 4 2013

COVER LETTER

TO: Registration Section of Corp.			
SUBJECT: AVA	LON HEATING AN	DAIR LLC	
	Name of Limit	ted Liability Company	
The enclosed Articles of A	mendment and fee(s) are sub	mitted for filing.	
Please return all correspond	dence concerning this matter	to the following:	
	C'HRISTIA	Name of Person	
	CHRISTIA	Name of Person AN AILEN TAC. Firm/Company	
	3721 Dup	ant Station Court South Address	<u>1</u>
	Jackson	City/State and Zip Code 99 @ SMail. Com be used for future annual report notificati	
	E-mail address: (1	99 @ SMail. Com	ion)
For further information cor	ncerning this matter, please co		,
Christian At	//erson	at (<i>904</i>) <i>386-647</i> Area Code & Daytime Te	7 elephone 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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Florida document number 4/3000000076 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

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Florida

Zip Code

If amending 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

Title	Name	Address	Type of Action
MGRM	TONEY, STEPHEN M.	3567 Jose TERRACE	Add
		JACKSONVILLE, FL 32217	Remove
			_
			Add
			Remove
<u> </u>			Add
			Remove
			-
			Add
			Remove
			Add
			Remove
			_
			Add
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			<u>.</u>

 	
FERRUARY	26
FEBRUARY	26, 2013
FERNARY	Signature of a member or authorized representative of a member CHRISTIAN ALLEN Transfer representative of a member

Page 3 of 3

Filing Fee: \$25.00

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SECTION LANGE OF STATE