L13000063135

(Requestor's Name)
(Address)
(Address)
(City (Chata Till 17) and 40
(City/State/Zip/Phone #)
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(Business Entity Name)
(Document Number)
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COVER LETTER

Division of C		*	*
SUBJECT: DJ Co	olina 11.C		
	Name of L	imited Liability Company	
The enclosed Articles	of Amendment and fee(s) are si	ubmitted for filing.	
Please return all corres	pondence concerning this matte	er to the following:	
	Evan Den		
		Name of Person	· · · · · · · · · · · · · · · · · · ·
	Bravo 1 Sdi	Firm/Company	
	503 N. Monro	e St	m2
		Address	2027 KAT
	Ruston, LA	71270	
	eun A ma- f	City/State and Zip Code	
For further information	E-mail address:	to be used for future annual report not	· · · · · · · · · · · · · · · · · · ·
Evan Derveloy		at (_ 985) 445 -554	ምር ^ና
Name	of Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for t	he 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 : Division of C P.O. Box 632 Tallahassee, 1	Section Corporations 17	Street Address: Registration Sec Division of Cor The Centre of T 2415 N. Monro	porations

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

VJ Cooling UC		
V.) Cooling UC (Name of the Limited Liability) (A Florida	ity Company as it now appears of a Limited Liability Company)	n our records.)
Florida document number _L130000L3135		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ited liability company here:	
The new name must be distinguishable and contain the words "Lim	ited Liability Company," the desig	nation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	PESS)	
		25
Enter new mailing address, if applicable:		FA_BAR
(Mailing address MAY BE A POST OFFICE BOX)		here: e designation "LLC" or the abbreviation "L.L.C." records, enter the name of the new registered orida street address
		7.00 9
B. It amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our recor	ds, enter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida si	reet address
- 1		, 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 605, 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 amerding 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>	Address	Type of Action
MER	Bravo 1 Solutions, U.C.	503 N. Monroe St.	ī ⊻ Add
		Ruston, 1.A 71270	□Remove
			□Change
			□Add
			□Remove
			□Change
			Remove
			□Change
			□Add
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Effective date, if other that (If an effective date is listed, the de Note: If the date inserted in document's effective date on	ate must be specific as this block does not	nd cannot be prior to meet the applicab	date of filing or mor le statutory filing	(option e than 90 days after fil requirements, this d	ing) Dumagan	t to 605.020 be listed a	07 (2 is th
he record specifies a delayed e ord is filed.	ffective date, but no	ot an effective tim	e, at 12:01 a.m. on	the earlier of: (b)	The 90th da	ay after th	2
Dated May 18	<u> </u>	<u> 2013 </u>	. •				

Filing Fee: \$25.00