

L13000156117

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 21, 2018

EDWARD KITCHEN
11251 BUSINESS PARK BLVD
JACKSONVILLE, FL 32256

SUBJECT: A-NATURAL COMFORT L.L.C
Ref. Number: L13000156117

We have received your document for A-NATURAL COMFORT L.L.C and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia L Simmons
Regulatory Specialist II

Letter Number: 118A00003605

RECEIVED

MAR 01 2018

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: A-Natural Comfort 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:

Edward Kitchen

Name of Person

A-Natural Comfort LLC

Firm/Company

11251 Business Park Blvd

Address

Jacksonville FL, 32256

City/State and Zip Code

EDCK6678@GMAIL.COM

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

For further information concerning this matter, please call:

EDWARD KITCHEN

904

466-9527

at (_____) _____

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

Simmons, Octavia I.

From: Ed Kitchen <edck6678@gmail.com>
Sent: Thursday, March 08, 2018 12:26 PM
To: Simmons, Octavia I.
Subject: Dissolution

I Edward Kitchen affirm that I have voluntarily dissolved first coast climate control llc document number L17000262835.

I will not not reinstate this document.

Thank you
Edward Kitchen

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

A-Natural Comfort 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 4/10/2007 and assigned
Florida document number L13000156117

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

FIRST COAST CLIMATE CONTROL LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

11251 Business Park Blvd

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

11251 Business Park Blvd

(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:

1340 WEST HARTLEY CIR

Enter Florida street address

DELTONA

Florida 32725

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 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	JODI DASILVA		<input type="checkbox"/> Add
		24 BLARE DR PALM COAST FL	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

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

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TALLAHASSEE, FLORIDA

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated February 28, 2018

Signature of a member or authorized representative of a member

Edward Kitchen

Typed or printed name of signee