## L14000033918

(Re	questor's Name)	
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2014 APR 25 PN 5: 02 SECRETARY OF STATE ORDAY

## **COVER LETTER**

TO: Registration Section **Division of Corporations** WS/RANGER, 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: Name of Person Borack Law Group, P.A. Firm/Company 130 Crown Oak Centre Drive Longwood, FL 32750 City/State and Zip Code dborack@boracklawgroup.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: **Derek Hewitt** 

Name of Person

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

(Name of the Limited Liab) (A Flori	da Limited Liability Company)	)
The Articles of Organization for this Limited Liability Florida document number, <u>L14000033978</u>	Company were filed on 02/27/2014	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
LH Thermostat Systems, LLC		
The new name must be distinguishable and end with the words "I	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 ADD	DRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		<del>.</del>
B. If amending the registered agent and/or reg registered agent and/or the new registered office ad		enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flor	rida
	City	Zip Code

## New Registered Agent's Signature, if changing Registered Agent:

CWS/RANGER, LLC

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 the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = Manager

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	LAU, JAMES	130 Crown Oak Centre Drive	🗆 Add
		Longwood, FL 32750	■ Remove
AMBR	Coilws.com, Inc.	353 West Grove Avenue	 ■ Add
		Orange, California 92865	□ Remove
			Add
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If amending any other information, enter change(s) here: (Attach a	iaaitionai sneets, ij necessary.)
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Effective date, if other than the date of filing:  (The effective date must be specific, cannot be prior to date of receipt or filed date and of the date this document is filed by the Florida Department of State)	(optional) cannot be more than 90 days after
April 17 , 2014	
Signature of a member or authorized represe	ntative of a member
Derek Hewitt	

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Filing Fee: \$25.00

FILED MANASSEE, FLORIDA TANASSEE, FLORIDA