

L14000112328

(Requestor's Name)

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STATE BAR OF FLA
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER
MAR -1

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: ROME AIR HVAC 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:

NATHANAEL MILBURN

Name of Person

ROME AIR HVAC LLC

Firm/Company

11498 FANGORN ROAD

Address

ORLANDO, FL 32825

City/State and Zip Code

nmilburn1@hotmail.com

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

For further information concerning this matter, please call:

NATHANAEL MILBURN

407 587-9400
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

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

ROME AIR HVAC LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on JULY 16, 2014 and assigned
Florida document number L14000112328.

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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

11498 FANGORN ROAD

(Principal office address MUST BE A STREET ADDRESS)

ORLANDO, FL 32825

Enter new mailing address, if applicable:

P O BOX 677727

(Mailing address MAY BE A POST OFFICE BOX)

ORLANDO, FL 32867

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:

11498 FANGORN ROAD

Enter Florida street address

ORLANDO

City

, Florida 32825

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>
AMBR	OMAR GARCIA	420 GENEVA DRIVE	☐ Add
		OVIEDO, FL 32765	☒ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
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			☐ Change

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 CLERK OF DISTRICT COURT
 TALAHASSEE, FLORIDA

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S-AMERICAN
FALLAHS ST. FLORID.

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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 FEBRUARY 22, 2016

Signature of a member or authorized representative of a member

NATHANIEL MILBURN

Typed or printed name of signee