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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ADVOS LEGAL PLLC

Account Number : I20150000090 Phone : (904)567-5311

Fax Number : (904)339-9504

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email

____support@advoslegal.com__



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Registration Section

TO:

COVER LETTER

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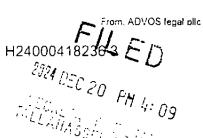
Division of C	orporations		
SUPER I	HEAT AND AIR, LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Kelsey Gulick		
		Name of Person	
	ADVOS legal pllc		
		Firm/Company	
	5000 Sawgrass Village Ci	rele. Suite 7	
		Address	
	Ponte Vedra Beach, Fl. 32	082	
	<u> </u>	City/State and Zip Code	
	support@advoslegal.com		
	E-mail address: (to be used for future annual report not	tification)
For further information	concerning this matter, please o	all:	
Kelsey Gulick		904 567-5311	
Name	of Person	at () Area Code Daytir	ne 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 radditional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addr Registration Division of P.O. Box 63 Tallahassee.	Section Corporations 27	Street Address: Registration Se Division of Co The Centre of 2415 N. Monre Tallahassee, Fl	orporations Tallahassee oe Street, Suite 810

To:

2024-12-20 14 43:32 GMT

19043399504

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



SUPER HEAT AND AIR, LLC		THE SELL FLORIST
(<u>Name of the Limited Liability Compar</u> (A Florida Limited L	iy as it now appears on our records iability Company)	· · · · · · · · · · · · · · · · · · ·
The Articles of Organization for this Limited Liability Company	were filed on 4/19/2015	and assigned
Florida document number L15000075941		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
NUHIC SHA, LLC		
The new name must be distinguishable and contain the words "Limited Liabili	ty 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 a agent and/or the new registered office address here:	ddress on our records, <u>enter t</u>	he name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	. Flor	rida
William To the Control of the Contro	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

To:	•	Page, 4 of 5	2024-12-20 14 43:32 GMT	19043399504	From: ADVOS legal pli

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>	Name	Address	Type of Action
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			□Remove
			Change
			TAUE TREMOVED
			Removes Change
			□ Remove
			□Change
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ective date, if other than effective date is listed, the date e: If the date inserted in thument's effective date on the	s block does not m	reet the applicabl	date of filing or more	(option e than 90 days after fit requirements, this d	al) ing.) Pursuant to 60 ate will not be lis	5.0207 (3)(ted as the
cord specifies a delayed effe rifled.	ective date, but not	an effective time	. at 12:01 a.m. on	the earlier of; (b)	The 90th day after	er the
December 17		2024				
Dry I	<u> </u>					
	Supature of a p	nember or authoriz	ed representative of	a member		