

D. SCOTT  
APR 3 2017

Office Use Only

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: MEJIA A/C AND HEATING, 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 MEJIA  
Name of Person  
MEJIA A/C AND HEATING, LLC.  
Firm/Company  
2344 SW SAVONA BLVD.  
Address  
PORT ST. LUCIE, FL 34953  
City/State and Zip Code  
MEJIAQUISQUEYA@YAHOO.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

NATHANAEL MEJIA at ( 772 ) 361-3220  
Name of Person Area Code Daytime Telephone Number

FILED  
17 MAR 30 AM 9:50  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

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**

MEJIA A/C AND HEATING, 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 2/20/2017 and assigned  
Florida document number L19000039175.

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:**

**(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 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:

*Enter Florida street address*

, 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 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	NATHANAEL MEJIA	2344 SW SAVONA BLVD. PORT ST. LOUISE, FL 34953	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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FILED  
MAR 30 9 50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

17

FILED  
MAR 30 AM 9:59  
U.S. DEPT. OF JUSTICE  
TALLAHASSEE, FLORIDA  
17 MAR 30 AM 9:59  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
Pursuant to 605.0207 (c)  
it will not be listed as the  
on the earlier of:

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** \_\_\_\_\_, \_\_\_\_\_

*[Signature]* 3/27/17  
Signature of a member or authorized representative of a member

NATHANAEL MEJIA  
Typed or printed name of signee