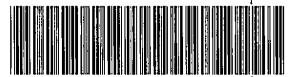
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(Re	equestor's Name)	
(Ac	ddress)	
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(Ci	ity/State/Zip/Phone #)	
PICK-UP	MAIL MAIL	
(Bu	usiness Entity Name)	
(Dc	ocument Number)	
Certified Copies	Certificates of Status	_
Special Instructions to	Filing Officer:	
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Office Use Only

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COVER LETTER

CHBICZT.	Change of C	ompany Name			1	
SUBJECT:		Name of Limi	ited Liability Company			
The enclosed	l Anicles of A	mendment and fee(s) are sub-	mitted for filing.			ı
Please return	all correspon	dence concerning this matter	to the following:			
		Marlon A Batista			l	
			Name of Person			
		Master Team Air Condition	ning LLC			
			Firm/Company			ı
		13890 NE 3rd Ct Apt 305				
			Address	<u> </u>		
		North Miami Florida 3316	1			
			City/State and Zip Code			ł
		mabatista@lvie.com		<u></u> = 1	2.73 4.15	
		E-mail address: ()	to be used for future annual report notification		100 H#	-17
For further in	nformation co	ncerning this matter, please co	ull:	正: 注:	<u>.</u> 3	
Marlon A Ba	atista		786 843-2869at () Area Code Daytime Telep		23	! !
	Name of	Person	Area Code Daytime Telep	hone Number	.0	
Enclosed is a	check for the	e following amount:		\$ ·	. 20	I
■ \$25.00 F	iling Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified Co	of Status &	

MAILING ADDRESS:

TO:

Registration Section Division of Corporations

> 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

Master Team Air Conditionign LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) and assigned Florida document number __L17000189508 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Thor Air Conditioning LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 900 SW 5th Ave Apt 4 Miami FL 33130 Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 900 SW 5th Ave Apt 4 Miami FL 33130 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 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 $_{
m I}$ 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>	Name	Address	Type of Action
			☐ Remove
			Change
			
		_	☐ Remove
			Change
			Add
			□ Remove
			□ Change
			Remove
			Remove AHASSICA Change
			
			ORID CO Remove
			□ Add
		 	Remove

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ctive date, if other than the date of filing:	(ontional)
effective date is listed, the date must be specific and cannot be prior to date of filing or more the order of the date inserted in this block does not meet the applicable statutory filing requiment's effective date on the Department of State's records.	an 90 days after filing.) Pursuant to 605.0207
record specifies a delayed effective date, but not an effective time, ne 90th day after the record is filed.	, at 12:01 a.m. on the earlier of
September 20 2017	
WATTA	
Signature of a member or authorized representative of a r	nember
Marlon A Batista	

Page 3 of 3

Filing Fee: \$25.00