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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

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

YEmail Address:_

LLC REGISTERED AGENT CHANGE STAY COOL MECHANICAL HVAC INDUSTRY, LLC

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M. SOLOMON

APR 15 2024

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. N	ame of the limited liability company: STAY COOL ME	CHANI	CAL HVA	C INDUSTRY, LLC
2. (a)		a	h)	
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	03/16/2018	_	L1800006	
3.	Date of filing/registration in Florida	4.		Document number
5. (a				<u></u>
	Registered Agent and Registered Office shown on the records of 17293 37th place N	the Florida	a Dept. of St	ate:
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRES.	<u>S)</u>	
				77 7 7
	Loxahalchee FL	33470		
(b)	REGISTERED AGENTS INC			
	Enter name of NEW Registered Agent and/or NEW Registered	Office ad	ldress:	· · -¬
	7901 4TH ST N			
	NEW Registered Office Address:			_
	STE 300			
	ST. PETERSBURG, FL	33702		_
chang agent was/w the ar	limited liability company is not organized under the law e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liayere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	register bility co f the lin limited l	ed office a empany, it nited liabil liability co	and the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in
/\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.	ature of a member or authorized representative of a member		oin Jones	Printed or typed name of signee
I here provide the old to men notifie	when the appointment as registered agent and agricions of all statutes relative to the proper and complete pligations of my position as registered agent as provided rely reflect a change in the registered office address, I have in writing of this change. [40] David Roberts Continuous Continuo	ee to act perform I for in C tereby co	in this ca ance of my Chapter 60 onfirm tha	nacity. I further agree to comply with the