Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000015893 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CONTRACTORS REPORTING SERVICES, INC.

Account Number : I20050000099 Phone : (813)932-5244 Fax Number : (813)932-3782

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

Email Address: info@activatemylicense.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN FRANKS & LANE HEATING AND AIR, LLC

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Corporate Filing Menu

Help

To:

Fax: (850) 617-6383

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01/12/2022 12:15 PM

COVER LETTER

TO: Registration Section **Division of Corporations** H220000158933

SUBJECT: FRANKS & L	ANE HEATING AND AIR	R, LLC	
	Name of Limited Liab		
The enclosed Articles of Amen	dment and fee(s) are submitted for	or filing.	
Please return all correspondenc	ee concerning this matter to the fo	ollowing:	
Α	MANDA JOHNS		
_	ν.	ame of Person	
C	CONTRACTORS REPOR	TING SEE	RVICE INC
		irm/Company	
		in company	
1	3795 N NEBRASKA AVE	Ξ	
_		Address	
Т	TAMPA, FL 33613		
		tate and Zip Co	ode
in	fo@activatemylicense.co	·m	
	E-mail address; (to be use	d for future and	ual report notification)
For further information concern	ning this matter, please call:		
AMANDA JOHNS		813	932-5244
Name of Perso		Area Code	Daytime Telephone Number

Mailing Address:

■ \$25.00 Filing Fee

Registration Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Name of Person

Enclosed is a check for the following amount:

☐ \$30.00 Filing Fee &

Certificate of Status

Street Address:

☐ S55.00 Filing Fee &

Certified Copy

(additional copy is enclosed)

Registration Section **Division of Corporations** The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

☐ \$60.00 Filing Fee,

Certified Copy

Certificate of Status &

(additional copy is enclosed)

To:

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

ARTICLES OF A		H22000015893 3
TO		
ARTICLES OF OF		
OF		The second second
		F. 7 0
FRANKS & LANE HEATING AND AIR, LL	C	
(Name of the Limited Liability Company (A Florida Limited Lia	as it now appears on our records	
(A Florida Entitled Eta	onity Company)	
The Articles of Organization for this Limited Liability Company w	vere filed on 5/21/2018	and assigned
The Afficies of Organization for this Elimited Embiney Company w	ere med on	
Florida document number L18000126940		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabili	ty company here:	
LANE HEATING & AIR LLC		
The new name must be distinguishable and contain the words "Limited Liability	y 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:		
N		
(Mailing address MAY BE A POST OFFICE BOX)		
		· · · · · · · · · · · · · · · · · · ·
B. If amending the registered agent and/or registered office ad	ldress on our records, <u>enter t</u>	the name of the new registered
agent and/or the new registered office address here:		
Name of New Registered Agent:		
rame of they registered rigen.		<u></u>
New Registered Office Address:		
-	Enter Florida street address	>
	Fle	orida
	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.

From: AMANDA JOHNS Fax: 18139325244

To:

Fax: (850) 617-6383

Page: 5 of 6

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If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

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MGR = M $AMBR = M$	MGR = Manager AMBR = Authorized Member				
<u>Title</u>	<u>Name</u>	Address	Type of Action		
			□Add		
			Remove		
			☐ Change		
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			□Remove		
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			Remove		

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)			
F. Effective date, if other than the date of filing: (optional)			
E. Effective date, if other than the date of filing:	rsuant to 605 I not be list	i.0207 (3 ed as th	i)(b) ie
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90 record is filed.	Oth day after	the 2022	
Dated JANUARY 11 2022	AHASSE	2022 JAN 12 AM 10: 07	FILED
Signifure of a member or authorized representative of a member	<u> </u>	A	
MARK LANE JR	ORID	O: 0:	

Typed or printed name of signee