118000149011

| (Reque | estor's Name) | |
|------------------------------|-------------------|----------|
| (Addre | ess) | |
| (Addre | ss) | |
| (City/S | itate/Zip/Phone # | 9 |
| PICK-UP | WAIT | MAIL |
| (Busin | ess Entity Name |) |
| (Docu | ment Number) | |
| Certified Copies | Certificates o | f Status |
| Special Instructions to Fili | ng Officer: | |
| | | |
| | | |
| | | |

Office Use Only



500315030275

07/09/18--01009--022 +*25.00

SECRETARY OF STATE OR USALION

N COOPER JUL 10 2018

COVER LETTER

| CHRINCT. | Air Fres | h Services, LLC | |
|-------------------------|--|---|--|
| SUBJECT: | Name of Limi | ited Liability Company | |
| The enclosed Articles | of Amendment and fee(s) are sub- | mitted for filing. | |
| Please return all corre | spondence concerning this matter | to the following: | |
| | | Yurizan Paz | |
| | | Name of Person | |
| | Ai | ir Fresh Services, LLC | |
| | | Firm/Company | |
| | 6516 Seafa | airer Drive, Tampa, FL 33615 | |
| | | Address | |
| | Tamı | pa, Florida 33615 | |
| | | City/State and Zip Code | |
| | • | rizanpaz@yahoo.com | |
| | E-mail address: (| to be used for future annual report notif | ication) |
| For further informatio | on concerning this matter, please ca | all: | |
| Yu | ırizan Paz | 813 384-0505 | |
| Nan | ne of Person | Area Code Daytime | : Telephone Number |
| Enclosed is a check fo | or 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

TO:

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

Air Fresh Services, 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 06/18/2018 _____ and assigned Florida document number L18000149011 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 Florula street address _. Florida _

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.

Cirv

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> | Address | Type of Action |
|--------------|-------------|---------------------------------|----------------|
| MGR | Yurizan Paz | 6516 Seafairer Drive, Tampa, Fl | ■ Add |
| | | | □ Remove |
| | | | Change |
| | | | Add |
| | | | ☐ Remove |
| | | | ☐ Change |
| | | | |
| | | | □ Remove |
| | | | Change |
| | | | |
| | | | Remove |
| | | Change | |
| | | | |
| | | | Remove |
| | | | Change |
| | | | |
| | | | Remove |
| | | | □ Change |

| | . | | | · - · | | | |
|--|--|---------------------------------------|--|--|--|----------------------------------|---------------------|
| | | | | | | | |
| | | | | | | | |
| ; | | | | | | | |
| • | | | | | | | |
| | | | | | | | |
| | | - . | | | | | — |
| | | | . | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | · | • | | | |
| | | | | | | | DI\ |
| | | | | | | 8 UL | ₩ 25 |
| | | | | | | | ≏± <u>-</u> |
| | | <u>.</u> | | | | <u> </u> | |
| | | <u>-</u> | | | | | <u> </u> |
| | | | | | | ₹5 | 5.5 |
| | | | | | <u> </u> | | |
| | | - | <u>-</u> | | | | |
| ffective date, if other th | an the date of | 06/16 filing: | 5/2018 | | (optional | .) | |
| an effective date is listed, the ote: If the date inserted i | date must be spec a this block does | ific and cannot b s not meet the : | e prior to date of applicable statt | filing or more that story tiling requ | i 90 days after filin rements, this dat | g.) Pursuant to e will not be | 605.02 listed |
| ocument's effective date of | n the Departme | nt of State's re | cords. | | | | |
| e record specifies a c | elaved effect | rive date hi | it not an eff | ective time | at 12:01 a.m | on the ea | arlier |
| The 90th day after t | he record is | filed. | se not an en | decive dirio, | GC 12.01 G. | 011 010 00 | .,c. |
| ated July 03 | | 2018 | | | | | |
| ated | } | - | ·· | | | | |
| | | | | | | | |

Typed or printed name of signee