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COVER LETTER

TO: Registration Section Division of Corporation		
SURJECT: Repi	t Cool AC & Appliances Repair LC Name of Limited Liability Company	ļ
SUBJECT:	Name of Limited Liability Company	
The enclosed Articles of An	nendment and fee(s) are submitted for filing.	
Please return all corresponde	ence concerning this matter to the following:	
		1
	Rafoel N. Rodriquez.	
	Name of Person	
	Reep it Cool AC & Appliances Repair LCC Firm/Company	
	Firm/Company	
	451 W 35 th PC	
	Address	j
	Hialech FC 3-2012 City/State and Zip Code	-
	City/State and Zip Code	261
	rrodriguez co2@yahoo. com E-mail address to be used for future annual report notification)	· • • • • • • • • • • • • • • • • • • •
	E-mail address (to be used for future annual report notification)	
For further information cond	perning this matter, please call:	
Rajoel N	erson at (786) 393-4402 Area Code Daytime Telephone Number	
Name of Po	Area Code Daytime Telephone Number	55 m
Enclosed is a check for the f	following amount:	
\$25.00 Filing Fee		ng Fee, e of Status &

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

Certified Copy

(additional copy is enclosed)

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

(additional copy is enclosed)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Keep et Cool AL & RIPP	wones 120	par un		_
(Name of the Limited Liability Compa (A Florida Limited)	iny <u>as it now appear:</u> Liability Company)	s on our records.)	ļ	
The Articles of Organization for this Limited Liability Company Florida document number		1/2-/201	? and	assigned
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company he	<u>re</u> :		
G&R Air Concuitioning LLC	,			
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the do	esignation "LLC" or the	abbreviation	"L.L.C."
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRESS)				<u> </u>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here. Name of New Registered Agent:		our records, ente		ne of the new
New Registered Office Address:			<u> </u>	
	Enter Flori	ida street address	20 to 5	2 117
		, Florida	· ; : -	
	City		Zip Co	*
	I II			1

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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

MGR =	Manager		
AMBR =	Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			[#]Add
		.	EChange
		· · · · · · · · · · · · · · · · · · ·	J. J
			[H]Remove
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amendi	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.)		
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Continue d	late, if other than the date of filing: (optional)	- 1	
n effective ote: If th	e date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursually date inserted in this block does not meet the applicable statutory filing requirements, this date will not seffective date on the Department of State's records.	nt to 60 be lis	5.0207 ted as
record he 90t	specifies a delayed effective date, but not an effective time, at $12\colon\!01$ a.m. on the things after the record is filed.	earl	ier of
ted	January 23rd 2019		
-	Signature of a member or authorized representative of a member		
	Rafael N. Roch 9122 Typed or printed hume of signee		
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Page 3 of 3

Filing Fee: \$25.00