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.

(((H19000142075 3)))



	H1 90001 4207 53 ABC\$			
Note: DO	O NOT hit the REFRESH/RELOAD butto Doing so will generate anothe	on on your browse er cover sheet.	er from this page.	_
То:				
	Division of Corporations Fax Number : (850)617-638	22		
	Fax dumber : (030)017-030	,,		20
Fro			프랑 그	7019 APR 30
	Account Name : REGISTERED A	AGENTS INC.		5
	Account Number : I20090000081 Phone : (307)200-280	i 93		<i>သ</i> ယ −
	(000)220 101			
	Fax Number : (855)330-10	10	.,	r
				30 14
annı	Tax Number : (855)330-10. The email address for this business all report mailings. Enter only one	entity to be u	used for future) AM 10: 26
annu Emai	the email address for this business ual report mailings. Enter only on	e entity to be use email address	used for future s please **	AM 10: 2
annu Emai	the email address for this business ual report mailings. Enter only one il Address: LLC AMND/RESTATE/CORRECTER MECHANICAL L	e entity to be use email address	used for future s please **	AM 10: 2
Emai	the email address for this business ual report mailings. Enter only one il Address: LLC AMND/RESTATE/CORRECT RG MECHANICAL I	T OR M/MG R	used for future s please **	AM 10: 2
annu Emai	the email address for this business ual report mailings. Enter only one il Address: LLC AMND/RESTATE/CORRECT RG MECHANICAL I Certificate of Status Certified Copy	T OR M/MG R USA LLC	used for future s please **	AM 10: 2
annu Emai	the email address for this business ual report mailings. Enter only one il Address: LLC AMND/RESTATE/CORRECT RG MECHANICAL I	T OR M/MG R	used for future s please **	AM 10: 2

Electronic Filing Menu

Corporate Filing Menu

Help

T GLASS

MAY 0 1 2019

1/1

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RG Mechanical USA LLC		· ·
(<u>Name of the Limited Liability C</u> (A Florida Lir	Company as it now appears on our records.) inted Liability Company)	
The Articles of Organization for this Limited Liability Com Florida document number L19000104134	pany were filed on 04/16/2019	and assigned
This amendment is submitted to amend the following:		
orida document number L19000104134 is amendment is submitted to amend the following: If amending name, enter the new name of the limited liability company here: e new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." other new principal offices address, if applicable:		
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 ADDRES	<u> </u>	
Enter new mailing address, if applicable:	<u>.</u>	2019 APR 30
(Mailing address MAY BE A POST OFFICE BOX)		7.2. 10 A 10 T-2. 10
B. If amending the registered agent and/or register registered agent and/or the new registered office addres	red office address on our records, <u>s</u> i <u>s here</u> :	enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Flori	da
	City	Zip Gode

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.

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
AMBR	Pedro Rodriguez	7901 4th St N STE 300	
		St. Petersburg FL 33702	☐ Remove
			☐ Change
			Remove
			Change
			Apple
			O D D D D D D D D D D D D D D D D D D D
			Addo 6
			□ Remove
			Change
			Remove
			☐ Change
		*	
			□ Remove
			□ Change

	26	
	## 9 P	
	<u> </u>	-
	30 1	
	- S =	
	<u></u>	
	<u> </u>	
fective date, if other than the date of filing: In effective date is listed, the date must be specific and cannot be prior to ote: If the date inserted in this block does not meet the applicable output of state is records.	(optional) date of filing or more than 90 days after filing.) Pursuant to 605.	.0201 ed as
e record specifies a delayed effective date, but not a The 90th day after the record is filed.	an effective time, at 12:01 a.m. on the earlie	er of
April 29 2019	_·	
\sim		
Signature of a member or authori	zed representative of a member	

Page 3 of 3

Filing Fee: \$25.00