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(Requesto	or's Name)	
(Address)		
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COVER LETTER

TO:	Registration Se Division of Cor		•		
217181		AIR COOLING SERVICES LL	С		
SUBJI	EUT:	Name of Limi	ted Liability Company		
The en	nclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.		
Please	return all correspo	ondence concerning this matter	to the following:		
		DAVID A LOPEZ			
		PAN AM AIR COOLING	Name of Person SERVICES LLC		
		13798 SW 139TH COURT	Firm/Company		
		MIAMI, FL 33186	Address		
		DAVID@PANAMAIRCON	City/State and Zip Code NDITIONING.COM		· 野
For fu	rther information c	E-mail address: () concerning this matter, please or	to be used for future annual report notificall;	ation)	STATE OF THE STATE
DAVI	ID A LOPEZ		786 <u>202</u> -0909	·	TACA DANA DANA DANA DANA DANA DANA DANA
Engla		of Person he following amount:	Area Code Daytime	Telephone Number	OF STATE
	25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fed Certificate of \$t Certified Copy (additional copy is c	atus &

MAILING ADDRESS:

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

PAN AM AIR COOLING SERVICE	ES LLC	
(Name of the Limite	d Liability Company as it now appears on our re A Florida Limited Liability Company)	cords.)
The Articles of Organization for this Limited Lia	ability Company were filed on 05/02/2019	and assigned
Florida document number L19000119824	·	
This amendment is submitted to amend the follo	wing:	
A. If amending name, enter the new name of	the limited liability company here:	
The new name must be distinguishable and contain the wo	ords "Limited Liability Company," the designation "	LLC" or the abbreviation "L.L.C,"
Enter new principal offices address, if applica	ble:	
(Principal office address MUST BE A STREET	TADDRESS)	
		
		5 8 CG
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE E	<u></u>	
		2 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
		St. State
B. If amending the registered agent and/or registered agent and/or the new registered off		ords, enter the name of the new
registered agent and/or the new registered on	ice address here.	بن
Name of New Registered Agent:		·
New Registered Office Address:		
	Enter Florida street aa	ldress
		, Florida
	Citv	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.

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	DAVID A LOPEZ	13798 SW 139TH COURT MIAMI. FL 33186	■ Add
	-		☐ Remove
			Change
			Remove
			Change
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Note: If the date insert	er than the date of fil I, the date must be specific ted in this block does no ate on the Department of	at meet the applicab	date of filing or more the statutory filing req		arsuant to 605.0 Il not be listed
	a delayed effective er the record is file		an effective time	, at 12:01 a.m. on	the earlier
Dated MAY 21		2019			
			~ 		
			1		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00