## 119000 189914

(Requestor's Name)
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(,,,,,,,
PICK-UP WAIT MAIL
(Business Entity Name)
(Decree and Musel and
(Document Number)
Certified Copies Certificates of Status
Overall Annual Annual Company
Special Instructions to Filing Officer:

Office Use Only



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## **COVER LETTER**

TO:

**Registration Section** 

Division of	Corporations					
SUBJECT:	Kopper Heating and	Cooling LLC				
3003t,c1:	Name of Lin	nited Liability Company				
The enclosed Articles	s of Amendment and fee(s) are sul	bmitted for filing.				
Please return all corre	espondence concerning this matter	r to the following:				
		Amber McGrew				
	Name of Person  Oaks Accounting LLC  Firm/Company  1001 W Grace St.  Address  Tampa, FL 33607  City/State and Zip Code  amcgrew@oaksaccounting.com  E-mail address: (to be used for future annual report notification)  oncerning this matter, please call:  McGrew  at (321) Area Code  Daytime Telephone Number  me following amount:					
		aks Accounting LLC				
	Firm/Company					
		1001 W Grace St.				
		Address				
		Tampa, FL 33607				
		City/State and Zip Code	<del>.</del>			
For further information						
Amb	er McGrew	at ( 321 ) 442	-0758			
Nan	ne of Person		me 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)			
	ILING ADDRESS:		RIER ADDRESS:			
Divi	istration Section ision of Corporations	Registration Sect Division of Corpo				
	. Box 6327 ahassee, FL 32314	Clifton Building 2661 Executive C	Center Circle			

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Kopper Heatin	•		
(Name of the Limited Liability Compar (A Florida Limited L	ay as it now appears liability Company)	on our records.)	
he Articles of Organization for this Limited Liability Company	were filed on	07-24-2019	and assigned
lorida document numberL19000189914			
his amendment is submitted to amend the following:			
. If amending name, enter the new name of the limited liabi	lity company he	<u>re</u> :	
he new name must be distinguishable and contain the words "Limited Liabil	ity Company," the de	signation "LLC" or the abl	previation "L.L.C."
Enter new principal offices address, if applicable:		<u>F-</u> (	<del></del>
Principal office address MUST BE A STREET ADDRESS)		. <b>5-</b>	SEP TH
		<u> </u>	<u> </u>
Enter new mailing address, if applicable:		•••• ••• •••	
Mailing address MAY BE A POST OFFICE BOX)		0.0	O
		27	·
3. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	2:		the name of the
Name of New Registered Agent:	Ambe	r McGrew	<del>.</del>
New Registered Office Address:		W Grace St.	
	77	, Florida	33607
	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.

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	Charles Brito	1000 Cove Cay Dr. Unit 3A	🖾 Add
		Clearwater, FL 33760	
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ective date, if other than n effective date is listed, the dat te: If the date inserted in the nument's effective date on t	e must be specific and ils block does not r	g: Leannot be prior to neet the applicab	date of filing or more		filing.) Pu		
record specifies a del he 90th day after the	ayed effective or record is filed.	date, but not	an effective tim	e, at 12:01 a	.m. on	the e	arlier
ed <u>08-30</u>	Ji.	2019	. •				
	Signature of a	26-2	/ed representative of	a member			_
		ancines a vi aumini	con remoderablist Oli	a 1110-1111701			

Page 3 of 3

Filing Fee: \$25.00