

L19000209061

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

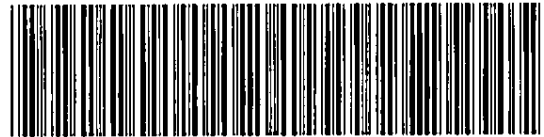
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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JAN 31 AM 9:38
TALLAHASSEE, FL

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2024 JAN 31 PM 3:24
TALLAHASSEE, FL

R. HUNT

01/31/24



CSC - Tallahassee
1201 Hays Street
Tallahassee, FL 32301-2607
850-558-1500, Ext: 61592

To: Department Of State, Division Of Corporations
From: Alexxis Weiland-Sorenson
Ext: 61592
Date: 01/31/24
Order #: 1412055-1
Re: EE&G Air Conditioning, LLC
Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Amount to be deducted from our State Account: \$25.00 - FL State Account Number:
I20000000195 Authorization:

Please take the following action:
File in your office on basis
Issue Proof of Filing

A handwritten signature in cursive script, appearing to read 'Alexxis Weiland-Sorenson', is written over the authorization text.

Special Instructions:

STATE
OFFICE
JAN 31 2024
AM 9:38

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: EE&G Air Conditioning, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Erika Morales

Name of Person

EE&G Air Conditioning, LLC

Firm/Company

14879 NE 20th Ave

Address

North Miami, FL 33181

City/State and Zip Code

emorales@eeandg.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Erika Morales

305

403-8644

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for 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
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

EE&G Air Conditioning, 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 August 15, 2019 and assigned
Florida document number L19000209061.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

EE&G Marine, LLC

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)

14879 NE 20th Ave, North Miami, FL 33181

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

14879 NE 20th Ave, North Miami, FL 33181

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 Florida street address

Florida

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>	<u>Address</u>	<u>Type of Action</u>
AMBR	Nizar Jay Kherani		<input type="checkbox"/> Add
		5751 Miami Lakes Dr. E. Miami Lakes, FL 33014	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Dave Buono		<input type="checkbox"/> Add
		5751 Miami Lakes Dr. E. Miami Lakes, FL 33014	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	John Earman		<input type="checkbox"/> Add
		5751 Miami Lakes Dr. E. Miami Lakes, FL 33014	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Donald Schambach	14879 NE 20th Ave, North Miami, FL 33181	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Robert DeVito	14879 NE 20th Ave, North Miami, FL 33181	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Glen Novaro	14879 NE 20th Ave, North Miami, FL 33181	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

DATE
FILED
MAR 9 2018
MIAMI FL

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>	<u>Address</u>	<u>Type of Action</u>
MGR	Timothy J. Gipe	14879 NE 20th Ave, North Miami, FL 33181	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Binh Luu	14879 NE 20th Ave, North Miami, FL 33181	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Adrian Woods	14879 NE 20th Ave, North Miami, FL 33181	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2012 JUN 11 AM 9:38
STATE
SEEL FL

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Typed or printed name of signee