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R. WHITE

DEC 0 4 2019

COVER LETTER

TO: Registration S Division of Co		•	
REFRIAII	R LLC.		
	Name of Lin	nited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	GEORGE GONZALEZ SA	NTIAGO	
	REFRIAIR LLC.	Name of Person	
	6560 NW 114TH AVE, AP	Firm/Company T 521	
	DORAL, FL 33178	Address	
	GITOLILU@YAHOO.COM	City/State and Zip Code	
	E-mail address: (to be used for future annual report notif	ication)
For further information	concerning this matter, please c	all:	
GEORGE GONZALE	Z SANTIAGO	787 612-8244 at ()	
Name	of Person	Area Code Daytime	: Telephone Number
Enclosed is a check for	the following amount:		
□ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 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/COURIER ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



2019 11 - L PH 12- 25

REFRIAIR LLC		4 : 112-33
	ited Liability Company as it now app (A Florida Limited Liability Compan	cars on our records.)
the Articles of Organization for this Limited lorida document number L19000213268	, , ,	AUGUST 21, 2019 and assigned
his amendment is submitted to amend the fol	llowing:	
If amending name, enter the new name	of the limited liability company	here:
VYNWOOD A/C & REFRIGERATION LLC		
ne new name must be distinguishable and contain the	words "Limited Liability Company," th	e designation "LLC" or the abbreviation "L.L.C."
nter new principal offices address, if appli	icable:	
Principal office address MUST BE A STRE		
The special section of the section o		
nter new mailing address, if applicable:		
Aailing address MAY BE A POST OFFICE	E BOX)	
. If amending the registered agent and egistered agent and/or the new registered of	•	on our records, enter the name of the
and a series of the series of	orrice address rever	
Name of New Registered Agent:	GEORGE GONZALEZ SANTIAGO	
New Registered Office Address:	6560 NW 114TH AVE. APT.	521
The state of the s	Enter I	Florida street address
	DORAL	Florida ³³¹⁷⁸
	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 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>	Name	<u>Address</u>	Type of Action
			Add
			☐ Remove
			Change
			
			☐ Remove
			Change
			□ Add
			С Веточе
			☐ Change
			☐ Remove
			□ Change
			
		- **** *** **	□ Remove
			☐ Change

			☐ Remove
			☐ Change

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	_, <u>=</u> .			
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Effective data if other than the	data of filings		(antional)	
Effective date, if other than the (If an effective date is listed, the date must Note: If the date inserted in this bl document's effective date on the D	st be specific and cannot be ock does not meet the a	applicable statutory filin		
the record specifies a delayed) The 90th day after the rec		ut not an effective t	ime, at 12:01 a.m. on 1	the earlier of:
OCTOBER 31	2019			
	u 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	·		
	Signature of a member of	r authorized representative	of a member	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00