

Florida Department of State

Division of Corporations
Electronic Filing Cover Sheet

L20000051879

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : CONTRACTORS REPORTING SERVICES, INC.
Account Number : I20050000099
Phone : (813)932-5244
Fax Number : (813)932-3782

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: amanda@activatemylicense.com

2022 JUL 13 AM 9:59

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
FRANKS AIR CONDITIONING & HEATING LLC**

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

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JUL 14 2022

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COVER LETTER

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**TO: Registration Section
Division of Corporations**

SUBJECT: FRANKS AIR CONDITIONING & HEATING 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:

AMANDA JOHNS

Name of Person

CONTRACTORS REPORTING SERVICE INC

Firm/Company

13795 N NEBRASKA AVE

Address

TAMPA, FL 33613

City/State and Zip Code

info@activatemylicense.com

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

For further information concerning this matter, please call:

AMANDA JOHNS

Name of Person

813

Area Code

932-5244

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**

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FRANKS AIR CONDITIONING & HEATING 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 3/13/2020 and assigned
Florida document number L20000081879.

This amendment is submitted to amend the following:

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

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)

5531 6TH ST

ZEPHYRHILLS FL 33542

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

5531 6TH ST

ZEPHYRHILLS FL 33542

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:

5531 6TH ST

Enter Florida street address

ZEPHYRHILLS

City

Florida 33542

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

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JUL 13 2022
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MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	BRANDI FRANKS	37451 LAYTON RD	<input checked="" type="checkbox"/> Add
		DADE CITY FL 33525	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	DEBORAH FRANKS	9909 PINE LEAF LN	<input type="checkbox"/> Add
		DADE CITY FL 33525	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	KEITH FRANKS	5531 6TH ST	<input type="checkbox"/> Add
		ZEPHYRHILLS FL 33542	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	ANTHONY FRANKS	5531 6TH ST	<input type="checkbox"/> Add
		ZEPHYRHILLS FL 33542	<input type="checkbox"/> Remove
			<input checked="" 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

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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ (optional)

(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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated JULY 7th 2022

Signature of a member or authorized representative of a member

ANTHONY FRANKS

Typed or printed name of signee