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Division of Corporations

Note: Please print this page and use it as a cover sheet. Type the fax audit number \(\frac{1}{2} \) hown below) on the top and bottom of all pages of the document.

(((H22000431626 3)))



H220004316263ABC-

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CONTRACTORS REPORTING SERVICES, INC.

Account Number : 120050000099 Phone : (813)932-5244 Fax Number : (813)932-3782

Please process the amendment as filed. It was

withdrawn by

mistake.

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

Enail Address: __info@activatemylicense.com

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

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-3 202**3** A. LUNT

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COVER LETTER

TO: Registration Section Division of Corporations H22000431626 3

SUBJECT: FRANKS A		& HEATING LLC ited Liability Company		
The enclosed Articles of Ame	endment and fee(s) are sub-	nitted for filing.		
Please return all corresponder	nee concerning this matter	to the following:		
	AMANDA JOHNS		· · · · · · · · · · · · · · · · · · ·	
		Name of Person		
_	CONTRACTORS RE		ICE INC	
		Firm Company		
_	13795 N NEBRASK	A AVE		
		Address		<u> </u>
	TAMPA, FL 33613			
_		City/State and Zip Code		
<u>i</u> !	no@activatemylicen	ise.com		
	E-mail address: (to	o be used for future annual	report notification)	
For further information conce	rning this matter, please ca	11:		
AMANDA JOHNS		813 9	32-5244	
Name of Per	sen	Area Code	Daytime Telepho	one Number
Enclosed is a check for the fo	llowing amount:			
■ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee Certified Copy (additional copy is end		\$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address: Registration Sect Division of Corpo P.O. Box 6327 Tallahassee, FL 3	prations	Divisio The Ce 2415 N	ddress: ation Section n of Corporatio ntre of Tallahas . Monroe Street .ssee, FL 32303	ssee t. Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

۲a.

2022 DEC 29 AM 11: 27

<u>FRANKS A</u>	IR CONDITIONING & F (Name of the Limited Liabilit (A Florida	<u> HEATING LLC</u>	<u> </u>		=
	(A Florida	Limited Liability Co	mpany)	corus.)	
The Articles of Organization	for this Limited Liability Co	ompany were file	d on 3/13/2020		and assigned
Florida document number 1	20000081879	<u></u> .			
This amendment is submitte					
A. If amending name, ent	r the new name of the limit	ted liability com	pany here:		
FRANKS AIR CONDITION	NG & HEATING LLC				
The new name must be distinguis	nable and contain the words "Limi	ted Liability Compa	ny," the designation "	LLC" or the abbrev	iation "L.L.C."
Enter new principal offices	address, if applicable:				
(Principal office address M	<u>UST BE A STREET ADDR</u>	<u>ESS)</u>			
Enter new mailing address	, if applicable:				· · · · · · · · · · · · · · · · · · ·
(Mailing address MAY BE)	<u> A POST OFFICE BON)</u>				·
 B. If amending the registe agent and/or the new regis 	red agent and/or registered ered office address here:	office address o	n our records, <u>en</u>	iter the name of	the new registered
Name of New Reg	stered Agent:				
New Registered Of	fice Address:				
inen neganerea so.	Tree:	1	mer Florida street ad	idress	
				. Florida	
		Сіц			lip Code
New Registered Agent's Sign	ature, if changing Registered	Agent:			
provisions of all statutes re accept the obligations of m	tment as registered agent a dative to the proper and co y position as registered ag t a change in the registered in writing of this change.	mplete performe ent as provided	ince of my duties for in Chapter 60	i, and Lam fami 95, F.S. Or, if th	liar with and is document is
		If Changing Regis	tered Agent, <u>Signatu</u>	ire of New Register	ed Agent

rom:	AMANDA	JOHNS	
			4

From: AMANDA JOHNS Fox: 18139325244 To Fox: (850) 617-6383 Page: 5 of 6 12/29/2022 1:23 PM

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11 amening Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added

or removed from our records:

H22000431626 3

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	FRANKS, ANTHONY R	5531 6TH ST.	□ Add
		ZEPHYRHILLS, FL 33542	Remove
		·	□Change
MGR	FRANKS, BRANDI	37451 LAYTON RD.	□Add
		DADE CITY, FL 33525	■Remove
			☐ Change
			□Add
			□Remove
			□Change
		.	□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
		 	□Add
			□Remove
			Change

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D. If amei	nding any other	information, enter change(s) here: (Attach additional sheets, if necessary.)
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(If an effe <u>Note:</u> 1	ctive date is listed, the fate inscried	han the date of filing:
f the record ecord is tile		d effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated_	DECE	NIBER 23 2022
		Docusigned by.
		Signature of a member or built-presentative of a member
		KEITH E FRANKS, MGR Typed or printed name of signee