LZ0000 117040

| (Requestor's Name) |
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| PICK-UP WAIT MAIL |
| (Business Entity Name) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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December 17, 2020

LANELL MERRITT LM HEATING AND COOLING LLC 9064 DOWDEN RD APT 319 ORLANDO, FL 32827

SUBJECT: LM HEATING AND COOLING LLC

Ref. Number: L20000117040

We have received your document and check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is L20000139805-K&LSERVICES LLC AND L10000008693-KL SERVICES LLC.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Susan Tallent Regulatory Specialist II

Letter Number: 820A00025639

COVER LETTER

| | Registration Se Division of Cor | | | |
|-------------|--|---|--|--|
| elib leze | 73. | g and Cooling LLC | | |
| SUBJEC | 1: | Name of Lim | ited Liability Company | |
| The enclo | sed Articles of | Amendment and fee(s) are sub | mitted for filing. | |
| Please ret | urn all correspo | ndence concerning this matter | to the following: | |
| | | Lanell Merritt | | |
| | | | Name of Person | |
| | | LM Heating and Cooling I | In and fee(s) are submitted for filing. International fee(s) are submitted for filing. International filing international feeth of filing. Metritt Name of Person Cating and Cooling LLC: Firm Company Dowden rd Apt. 319 Address In Florida, 32827 City/State and Zip Code E-mail address: (to be used for future annual report notification) this matter, please call: at (216) 597-244 Area Code Daytime Telephone Number Tog amount: 100 Filing Fee & S55.00 Filing Fee & Certificate of Status & Certifi | |
| | | | Firm Company | |
| | | 9064 Dowden rd Apt. 319 | Pomitted for filing. It to the following: Name of Person LLC: Firm Company Address City/State and Zip Code (to be used for future annual report notification) call: at (216) | |
| | | | Address | |
| | | Orlando Florida, 32827 | | |
| | | | City/State and Zip Code | |
| | | lmerritt1@live.com | | |
| | | E-mail address: (| to be used for future annual report not | (fication) |
| For further | er information c | oncerning this matter, please co | all: | |
| La | nell Me | rntt | ar (216) 547-8 | .(1) |
| | Name o | f Person | Area Code Daytin | ne Telephone Number |
| Enclosed | is a check for th | ne following amount: | | |
| □ \$25.0 | 00 Filing Fee | S30.00 Filing Fee & Certificate of Status | Certified Copy | Certificate of Status & Certified Copy |
| _ | Mailing Addres Registration S | | · · · · · · · · · · · · · · · · · · · | ection |
| I | Division of C | orporations | Division of Co | rporations |
| | ^P .O. Box 632 Fallahassee, I | | | |

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| LM Heating and Cooling LLC | | |
|---|---|-------------------------|
| (<u>Name of the Limited Liability</u> (A Florida l | Company as it now appears on our records.) Imited Liability Company) | 1 |
| The Articles of Organization for this Limited Liability Co Torida document number L20000117040 | ompany were filed on 04/30/2020 | and assigned |
| his amendment is submitted to amend the following: | | |
| If amending name, enter the new name of the limit | ed liability company here: | |
| Cand L Domestic Services LLC | | 45.3 |
| he new name must be distinguishable and contain the words "Limit | ed Liability Company," the designation "LLC" of | |
| Inter new principal offices address, if applicable: | | E |
| Principal office address MUST BE A STREET ADDRI | ESS) | 1 |
| | | |
| | | - ' |
| Inter new mailing address, if applicable: | | 7: 52 |
| Mailing address MAY BE A POST OFFICE BOX) | | |
| | | |
| | | |
| 3. If amending the registered agent and/or registered gent and/or the new registered office address here: | office address on our records, enter th | ie name of the new regi |
| | | |
| Name of New Registered Agent: | | |
| New Registered Office Address: | | |
| | Enter Florida street address | |
| | Flor | ida |
| | 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 |
|--------------|----------------|-----------------------|----------------|
| Partner | Kevin Walthour | 1833 Conley Trace | ±Add |
| | | Conley, Georgia 30288 | |
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| ective date, if other than the d reffective date is listed, the date must b | ate of filing: | | (optiona | 1) |
| reffective date is listed, the date must b te: If the date inserted in this bloc | e specific and cannot be price to does not meet the apple. | or to date of filing or mor icable statutory filing | e than 90 days after filin requirements, this dat | g.) Pursuant to 605,020 e-will not be listed a |
| cument's effective date on the Dep | | | | |
| and made a blue of oversion | laka baran manadikarika | tines at 12:01 a.m. as | o thur mortion of the total | Thu OOth day offine the |
| cord specifies a delayed effective (is filed. | ate, but not an effective | time, at 12.01 a.m. of | i the earner or. (b) | ne som day and the |
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| ted December 30th | | · | | |
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