LZO 000 141060

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
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Letter Number: 120A00016052

FLORIDA DEPARTMENT OF STATE Division of Corporations

August 22, 2020

MARK KOLMAN KRS HVAC & REFRIGERATION SERVICES, LLC 10490 NW 20TH CT SUNRISE, FL 33322

SUBJECT: KRS HVAC & REFRIGERATION SERVICES, LLC

Ref. Number: L20000141060

We have received your document for KRS HVAC & REFRIGERATION SERVICES, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

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.

Shelia H Young Regulatory Specialist II

www.sunbiz.org

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

KRS HVAC & REFRIGERATION SERVICES LLC
(Name of the Limited Liability Company as it now appears on our records.)

(<u>Name of the Limited</u> ()	A Florida Limited Liability Company)
The Articles of Organization for this Limited Lia Florida document number	ability Company were filed on 9-5-2020 and Signed 060
This amendment is submitted to amend the follow	wing:
A. If amending name, enter the new name of	the limited liability company here:
The new name must be distinguishable and contain the wo	ords "Limited Liability Company," the designation "E.E.C" or the abbreviation "E.E.C."
Enter new principal offices address, if applica	ble:
(Principal office address MUST BE A STREET	"ADDRESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE B	
B. If amending the registered agent and/or reagent and/or the new registered office address	gistered office address on our records, <u>enter the name of the new registered</u> is here:
Name of New Registered Agent:	MARK KOLMAN
New Registered Office Address:	Sunrisk Florida 33322
	Sunrest Florida 33322
	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.

Mark Colman.
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	
AMRR =	Authorized	Memb

<u>Title</u>	<u>Name</u>	Address	Type of Action
CEO	MARK KOLMAH	10490 HW 20th CT Survise 43	33322 (Xadd
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			□Remove
			TIChange

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Note:	ve date, if other than the date of filing:
record is fi	d 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 ed.
Dated	9-5-2020 Plane Valuar Signature of a member or authorized representative of a member
	Hule Calman