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COVER LETTER

	Registration Se Division of Cor			
SUBJEC	Thermalgua	ard. L.I.C	•	•
моватус	, 1.	Name of Lin	nited Liability Company	
		Amendment and fee(s) are sub	-	
	·	Joyce B. Carlson	g.	
			Name of Person	
		Thermalguard, LLC		
			Firm/Company	
		631 NW 82 Ave., Suite 20	3	
			Address	
		Miami, FL 33126		
		smontero@bellsouth.net E-mail address: (City/State and Zip Code to be used for future annual report notif	fication)
For furthe	er information e	oncerning this matter, please c		,
Gonzalo	Montero		305 490-9288	
	Name o	f Person	Area Code Daytime	e Telephone Number
Enclosed	is a check for th	ne following amount:		
≡ \$25.0	00 Filing Fee	□ \$30.00 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)
,	Mailina Addres	e.	Second Address	

<u> Mailing Address:</u>

TO:

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

Thermalguard, L.L.C		7
(<u>Name of the Limited Liability C</u> (A Florida Lir	ompany as it now appears on our records.) mited Liability Company)	
The Articles of Organization for this Limited Liability Com Florida document number 1.20000144349	pany were filed on May 27, 2020	and assigned
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited</u>	Hiability 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 ADDRES	<u> </u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of agent and/or the new registered office address here: Name of New Registered Agent:	fice address on our records, enter the	name of the new registere
New Registered Office Address:	Enter Florada street address	
	, Floric	la 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>	Name	Address 222 JULI 11 P., 5: 27	Type of Action
MGR	Joyce Carlson		□Add
		631 NW 82nd Ave., Suite 203 Miami, FL 33126	Remove
			□Change
MGR	Gonzalo Montero	631 NW 82nd Ave., Suite 203 Miami, F1, 33126	= Add
			□Remove
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			🗆 🗆 🗀 Add
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. Effective date, if other than the	e date of filing: (or	otional)
(If an effective date is listed, the date n	ust be specific and cannot be prior to date of filing or more than 90 days a block does not meet the applicable statutory filing requirements.	fter filing.) Pursuant to 605,0207 (3)(
the record specifies a delayed effect cord is filed.	ive date, but not an effective time, at 12:01 a.m. on the earlier of:	(b) The 90th day after the
Dated	2020	

Typed or printed name of signee