## L20000196561

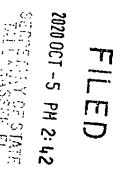
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## **COVER LETTER**

TO: Registration Section

orations		
TEMAIR LLC		
Name of Limi	ited Liability Company	
		·
mendment and fee(s) are sub-	mitted for filing.	
JERUMIE	Name of Person	·
(Y)TETTAL	R LLC	
	Firm/Company	
4815 Win	Dy HAMMOCK W	JAY
	Address	
PALMETTO F	L 34221	· 
E-mail address: (	to be used for future annual report not	ification)
ncerning this matter, please ca	all:	
quiremi.	at (404) 46	10 - 3775
Person	Area Code Daytir	ne Telephone Number
e following amount:		
		☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>:</u> ection	Street Address: Registration So	ection
orporations	Division of Co	rporations
7 L 32314		Tallahassee oe Street, Suite 810
	Name of Limited and fee(s) are substituted and f	Name of Limited Liability Company  Amendment and fee(s) are submitted for filing.  Idence concerning this matter to the following:    Service   Coquiethi   Name of Person

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SYSTEMAIR LLC	
(Name of the Limited Liability Compa (A Florida Limited l	ny as it now appears on our records.)  Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>42000 196561</u> .	were filed on 07 · 09 · 2020 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	3328 toxasta (3)
(Principal office address MUST BE A STREET ADDRESS)	3328 FOTH CT E. 34221 5 T
Enter new mailing address, if applicable:	3328 FOTH CT E. 55 7 M PALMETTO FL 3422 0 0
(Mailing address MAY BE A POST OFFICE BOX)	THE TO VE. STEEL ST.
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida City Zip Code
New Registered Agent's Signature, if changing Registered Agent	<u>:</u>
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is

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
MGR	Jerenie Z. Goglicemi	4815 WINDY HAMMOCK WAY	_ <b>A</b> Add
		PALMETTO FL 34221	□Remove
			Change
	, <del></del>	· · · · · · · · · · · · · · · · · · ·	□Add
			© □ <b>S</b> move
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Filing Fee: \$25.00