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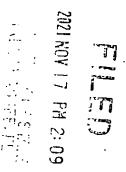
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## **COVER LETTER**

TO:

TO:	Registration Se Division of Co			
CHD 4E4		Cooling & Heating LLC		
SUBJEC	٠١; <u> </u>	Name of Lim	nited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please re	eturn all correspo	ondence concerning this matter	to the following:	
		Mario Dragustinovis		
			Name of Person	-
		Almighty Cooling & Heat	ing LLC	
			Firm/Company	_
		3025 Park Ridge Ave		. 2
			Address	021
		Mulberry Fl. 33860		Y07
		Almightycooling@gmail.cc	City/State and Zip Code	- 7 PH
		E-mail address: (	(to be used for future annual report notification)	2
For furth	er information o	oncerning this matter, please c	all:	0
Mario D	ragustinovis		863 660-8785 at ( )	
	Name o	f Person	Area Code Daytime Telephone Number	ir
Enclosed	l is a check for the	he following amount:		
□ <b>\$</b> 25.	00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certified	ate of Status &
	Mailing Address Registration S Division of C P.O. Box 632 Tallahassee, 1	Section Corporations 27	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 8 Tallahassee, FL 32303	310

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Almighty Cooling & Heating LLC			
( <u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now appears o Liability Company)	n our records.)	
The Articles of Organization for this Limited Liability Compan	y were filed on12	//28/2020	and assigned
Florida document number L21000015424			
This amendment is submitted to amend the following:			
a. If amending name, enter the new name of the limited lia	bility company here	:	
Almighty A/C & Home Improvements LLC			
he new name must be distinguishable and contain the words "Limited Liab	oility Company," the desig	gnation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicable:			
		<del></del>	792
Principal office address MUST BE A STREET ADDRESS)	<del> </del>		75 er75
		<u> </u>	<u> </u>
			7
nter new mailing address, if applicable:			0
• • • • • • • • • • • • • • • • • • • •			
Mailing address MAY BE A POST OFFICE BOX)			<u>N</u>
		, ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;	0
. If amending the registered agent and/or registered office gent and/or the new registered office address here:	address on our reco	rds, <u>enter the name</u>	of the new regis
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:

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
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			□Remove
			□Change
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fective date, if other than the date of filing:	(optional)
n effective date is listed, the date must be specific and cannot be	prior to date of filing or more than 90 days after filing.) Pursuant to 605.0 oplicable statutory filing requirements, this date will not be listed
cument's effective date on the Department of State's reco	
ecord specifies a delayed effective date, but not an effecti is filed.	ve time, at 12:01 a.m. on the earlier of: (b) The 90th day after t
November 13 2021	
ited	·
Maria TI	>
/ 6/27** / / //	authorized representative of a member