7/18/22, 2:33 PM



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(((H22000243347 3)))



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : API PROCESSING Account Number : I20110000059 : (954)567-0013 : (954)567-3401 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

COR AMND/RESTATE/CORRECT OR O/D RESIGN FLORIDA AIR PRO'S HEATING & COOLING LLC

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J. HORNE

JUL 19 2022

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TO:

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COVER LETTER

TO:	Registration Se Division of Cor			
		Pro's Heating & Cooling LLC		
SUBJECT: Nume of Limited Liability Company				
The en-	closed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
			Kathy Ballam	
			Name of Person	_
		A	API Processing-Licensing Inc	
			Firm/Company	<u> </u>
		341	9 Galt Ocean Drive Suite A	
			Address	
		F	Fort Lauderdale FI. 33308	
			City/State and Zip Code	
			athy@apiprocessing.com	
			to be used for future annual report nouti	cation)
For fur	ther information c	oncerning this matter, please or	all:	
Kathy	Ballam		954 567-0013 x l	
	Name o	f Person	at () Area Code Daytime	Telephone Number
Enclose	ed is a check for th	ne following amount:		
= \$ 2.	5.00 Filing Fee	□ \$30.00 Filing Fec & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	 \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address: Registration Section

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassec 2415 N. Monroe Street, Suite 810 Tailahassee, FL 32303

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

F	londa Air Pro's He	rating & Cooling LLC	TO SECOND
(Name of the Limi	ted Liability Compa (A Florida Limited	any as it now appears on our Liability Company)	records.) LCAR
The Articles of Organization for this Limited L Florida document number <u>L21000039091</u>	iability Company	were filed on 01/19/202	and assigned
This amendment is submitted to amend the following	ówing:		
A. If amending name, enter the new name of	f the limited liab	ility company here:	
The new name must be distinguishable and contain the s	vords "Limited Liabi	lity Company," the designation	n"LLC" or the appreviation "L.L.C."
Enter new principal offices address, if applie	able:	2659 E GULF TO LAK	E ITWY STE 322
(Principal office address MUST BE A STREE		INVERNESS, FL 3445	,
Enter new mailing address, if applicable:		2659 E GULF TO LAK INVERNESS, FL 34453	
(Muiling address MAY BE A POST OFFICE	<u>BOX)</u>	INVERNESS, CE 3443	
B. If amending the registered agent and/or a agent and/or the new registered office addre		uddress on our records,	enter the name of the new registered
Name of New Registered Agent:	ROBERTO M	SOTO VAZQUEZ	<u></u>
New Registered Office Address:	2659 E GUUF	TO LAKE HWY STE 322	
·	Sample of the Sa	Enter Florida street	0.146
	INVERNESS	Ciry	, Florida
		/	

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

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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
лМВR	Omar J Matos	2659 E Gulf To Lake Hwy	□Add
	,	Suite 322	≡ Remove
		Inverness F1, 34452	ElChange
AMBR	Roberto M Soto Vasquez	2659 E GULF TO LAKE HWY STI: 322	
		INVERNESS, FL 34453	LiRemove
			≣ Change
			□Add
			ORemove
			□ Change
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Effective date, if oth	er than the date of filing	g:	(optio	nal)
Tote. If the date maci	ter to this prock and that I	neet the applicable statutory:	filing requirements, this	date will not be listed as
tocument 2 effective (late on the Department of S	state's records.		
récord specifies a del	aved effective date, but not	an effective time, at 12:01 a.	m, on the earlier of: th)	The 90th day after the
d is filed.	,			The your day and the
T 1.	10			
Dated V July	18	2022	E	
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			Carl .	

Filing Fee: \$25.00

Typed or printed name of signee