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TO:

	Registration Se Division of Cor				
erib deze		Trane Service LLC			
SORIEC	Γ:				
The enclo	end Articles of	Amendment and fec(s) are sub	mitted for filing		
		ndence concerning this matter	-		
		Lester Benton Thompson I	11		
	Name of Person				
Hernando Crane Service LLC					
			Firm/Company		
	774 Sea Holly Dr				
	Address				
	Brooksville, FL				
	City/State and Zip Code				
		j.thompsonbt3@gmail.com			
		E-mail address: (to be used for future annual report not	iification)	
For furthe	r information c	oncerning this matter, please co	aH:		
Jennifer Anne Thompson			813 503-7641		
Name of Person			at () Area Code Daytir	ne Telephone Number	
Enclosed	is a check for th	ne following amount:			
■ \$25.0	O Filing Fee	S30.00 Filing Fee & 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		<u>Street Address:</u> Registration Se	ection		
Division of Corporations			Division of Corporations The Centre of Tallahassee		
P.O. Box 6327 Tallahassee, FL 32314			2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT. ARTICLES OF ORGANIZATION OF

Hernando Crane Service, LLC

(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on January 26, 2021 and assigned Florida document number L21000047168 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Cire 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 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	Lester B. Thompson III	774 Sea Holly Dr. Spring Hill, FL 34604	= Add
			□Remove
			□ Change
AMBR	Donald F. Hix, Jr.	3398 Horseshoe Lane, Spring Hill, FL 34606	\exists Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
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		· 	□Remove
			□Change
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			□Remove
			□Change

Typed or printed name of signee