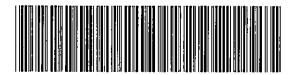
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(R	Requestor's Name)	
(A	ddress)	
(A	ddress)	
(C	City/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(B	lusiness Entity Name)	
(D	Ocument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	o Filing Officer:	_
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Office Use Only



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ECRETARY OF STATE

## **COVER LETTER**

TO: Registration Section

Division of Cor	porations		
JF SERVP			
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	JOSE GUARACHE		
		Name of Person	
	JOSE GUARACHE / JF S	ERVPRO	
	·	Firm/Company	······································
	1077 GOLDEN CANE DI	R	
		Address	
	WESTON F1. 33327		
		City/State and Zip Code	·• ·•
	climteellc@gmail.com		
		to be used for future annual report not	(dication)
For further information c	oncerning this matter, please c		
JOSE GUARACHE		754 2816882 Area Code Daytir	
Name o	f Person	Area Code Daytir	ne Telephone Number
Enclosed is a check for the	he following amount:		
■ \$25.00 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)
<u>Mailing Addres</u> Registration (		Street Address: Registration Se	ection
Division of C	orporations	Division of Co	rporations
P.O. Box 632 Tallahassee, F		The Centre of 2415 N. Monro	Tallahassee oc Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

ARTICLES OF	OF ORGANIZATION TOTAL FILES
	DO L C DIDANY AS II HOW ADDERTS ON OUR records.) ed Liubility Company)
The Articles of Organization for this Limited Liability Compa Florida document number <u>L 7 10000 560</u> Z	any were filed on $O2/O1/2021$ and assigned
This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited li  CLIMTEC, LLC  The new name must be distinguishable and contain the words "Limited Lie	<del></del>
Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)	1077 GOLDEN CANEOR.
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1077 GOLDEN CANEDA WESTON, FL 33327
B. If amending the registered agent and/or registered offic agent and/or the new registered office address here:	e address on our records, enter the name of the new registered
Name of New Registered Agent:  New Registered Office Address: 1077	COLDEN CANT DR  Enter Florida street address
Now Positioned Associa State was 15 state at a Position Associa	Florida 33327  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 = Mnnager AMBR = Authorized Member

Title	Name	<u>Address</u>	Type of Action
MGR	JOSE GUARACHE	1077 GOLDEN CANE DR	DAdd
		WESTON FL 33327	≣ Remove
		<del> </del>	Change
MGR	VIRGINIA RODRIGUEZ	1077 GOLDEN CANE DR	
		WESTON FL 33327	□Remove
MGR	ANDRES GUARACHE	1077 GOLDEN CANE DR	≌Add
		WESTON FL33327	□ Remove
	•	-	Change
<del></del>			□Add
		<del></del>	Remove
			□ Change
			DAdd
			□ Remove
			☐ Change
			□A6d
			□Remove
			☐ Change

			<del></del>
			**************************************
Effective date, if other than the fan effective date is listed, the date misorie: If the date inserted in this blocument's effective date on the I	e date of filing:  Ist be specific and cannot be prior to block does not meet the applicable Department of State's records.	date of filing or more than 90 days a le statutory filing requirements,	ptional) ther filing.) Pursuant to 605.0207 this date will not be listed as
record specifies a delayed effecti f is filed.	ve date, but not an effective tim	e, at 12:01 a.m. on the earlier of	(b) The 90th day after the
ated	2023		
	Signature of a member or authori	3UANA CHO	
	agranue or a memoer or authori	ver representative of a memori	

Filing Fee: \$25.00