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(Re	questor's Name)	
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	- NAVAUT	
☐ PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Name	·)
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Certified Copies	_ Certificates o	of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Registration Se Division of Cor				
SUBJECT: BLUE	AIR HVAC LLC			
 -	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for tiling.		
Please return all correspo	ondence concerning this matter	to the following:		
	JACKIE FARRIS			
		Name of Person		
	BSI CONTRACTOR SE	ERVICES		
		Firm/Company		
	36 ARLINGTON RD S			
		Address	· · · · · · · · · · · · · · · · · · ·	
	JACKSONVILLE, FL 3	2216		
		City/State and Zip Code		
	JACKIE@BSICONTRA E-mail address: (CTORSERVICES.COM to be used for future annual report notifi-	cation)	\Diamond
For further information co	oncerning this matter, please co	all:		
JACKIE FARRIS		at (<u>904</u>) <u>683-5494</u>	_ 	
Name o	f Person	Area Code Daytime	Telephone Number	٠ .
			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	**** ***
Enclosed is a check for th	ne following amount:		7.11	<u> </u>
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status Certified Copy tadditional copy is enclosed.	
Mailing Addres	8:	Street Address:		
Registration S	Section	Registration Sect		
Division of C P.O. Box 632	-	Division of Corp The Centre of Ta		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BLUE AIR HVAC LLC		
(<u>Name of the Limited Liability Company as it now</u> (A Florida Limited Liability Con	appears on our records.) npany)	
The Articles of Organization for this Limited Liability Company were filed	on 02/05/2021	and assigned
lorida document number		
this amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability comp	any here:	
he new name must be distinguishable and contain the words "Limited Liability Company	s," the designation "LLC" or t	lie abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		
Inter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		·
		•
3. If amending the registered agent and/or registered office address on	our records, enter the	name of the new registere
gent and/or the new registered office address here:		~
		> <u>i</u>
Name of New Registered Agent:		
New Registered Office Address:		21.
Ex	ner Florida street address	••
	, Florid:	l
Ciny		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 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

Title	<u>Name</u>	Address	Type of Action
AMBR	ADEM BIRDAL	6512 WHITE BLOSSOM CIR	≣ Add
		JACKSONVILLE, FL 32258	□Remove
			□)Change
			□ Add
			□Remove
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			Remove
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			□Change
			□Add
			□Remove

_____ □Change

Effective date, if other than the date of filing: (If an 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 605.0207 (3 Mote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the cord is filed. Dated 07-15	it amending any other information	on, enter change(s) here: (Attach a	idditional sheets, if necessary.)	
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Signature of a member or authorized representative of a member	07-15 Dated	2021		
Signature of a member or authorized representative of a member		Vin Richel		
	&	gnature of a member or authorized represer	ntative of a member	