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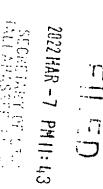
(Requestor's Name)
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(Business Entity Name)
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COVER LETTER

COVER LETTER
TO: Registration Section Division of Corporations
SUBJECT: LAN Air Conditioner LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Leonar Ovozco Conzalez Name of Person
Lan Air Conditioner LLC
1913 NEAST COAST ST
Lake Worth, Fr. 33460 City/State and Zip Code
Lanair con di tioning @ 9 mail. Com E-mail address: (to be used for future anual report notification)
For further information concerning this matter, please call:
Leonar Orozco Gonzalez at (561) 614-7576 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Solution Signature Solution So

Mailing Address:
Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

ARTICLES OF ORGANIZATION
OF The Property of the Propert
ARTICLES OF ORGANIZATION OF AN AIR Conditioner LLCSTONER PMII: 43 (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)
he Articles of Organization for this Limited Liability Company were filed on 03 04 22 and assigned lorida document number <u>L21000367212</u>
his amendment is submitted to amend the following:
he new name must be distinguishable and contain the words "Limited Liability Company." the designation "LLC" or the abbreviation "L.L.C."
nter 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, <u>enter the name of the new registere</u> gent and/or the new registered office address here:
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 addecor removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
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i effect	date, if other that ive date is listed, the da	te must be specifi-	c and cannot be	prior to date of	fling or more than	(optional) 90 days after tili	ng.) Pursuant to 60	05.0207
<u>te:</u> If	the date inserted in the seffective date on	his block does i	not meet the a	oplicable statu	tory filing requi	rements, this do	ite will not be lis	sted as
cumen	Seriestive date on	the trepartment	or Brane 1974					
ecord s	pecifies a delayed ef	fective date, but	t not an effect	ive time, at 12	:01 a.m. on the	earlier of: (b)	The 90th day aft	er the
is filed								
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