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## **COVER LETTER**

to the second

Registration Section

TO:

Division of Cor	porations		
SUBJECT: //EE/	Cool Air Con	ited Liability Company	
The enclosed Articles of .	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Dashiell Her		
	LEEPCOOL A	Fire Corp. L.L.C.	
		port Drive Suit	e 107
	Orlando, F	City/State and Zip Code  Le De Wail-Com  to be used for future annual report no	
		City/State and Zip Code	
	(BETCOOLDIVIV	repowal com	+:Castian)
	ve-man address: (	to be used for future annual report no	ancation)
For further information co	oncerning this matter, please ca	all:	
Dashiell	Hernandez	at (407) 408-3	5536
Name of	Person	Area Code Daytii	me Telephone Number
Enclosed is a check for th	e following amount:		
₹ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration S		Street Address: Registration S	ection
Division of C		Division of Co	
P.O. Box 632		The Centre of	
Tallahassee, I	FL 32314	2415 N. Monr	oe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

KEENDOL AIRCORD. L		
( <u>Name of the Limited Liability</u> (A Florida L	Company as it now appears on our re- imited Liability Company)	ecords.)
The Articles of Organization for this Limited Liability Co	mpany were filed on <i>Flor</i> ,	iola and assigned
Florida document number <u>L 2100038 737/</u>		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	ed liability company here:	
The new name must be distinguishable and contain the words "Limite	ed Liability Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	<del></del>	
(Principal office address MUST BE A STREET ADDRE	<u> </u>	
		ovi 2023
Enter new mailing address, if applicable:	<del></del>	
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
		ZI H.
B. If amending the registered agent and/or registered eagent and/or the new registered office address here:	office address on our records, <u>e</u> r	nter the name of the new registered
agent and/or the new registered office address here.		<b>9</b>
Name of New Registered Agent:		<del></del> .
New Registered Office Address:		
	Enter Florida street a	ddress
<u></u>	<del></del>	, 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 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>	<u>Address</u>	Type of Action
VP_	Serpio Faleivas JR	2380 Ra Pollo Dr.	
	)	Lissimmet, FL 34741	Remove
			□Change
<u>vP</u>	Rodrigo Cherobin	2730 Avian Loop Lissi mmee, FL 34741	🗖 Add
		LissimmEB, FL 34741	Remove
			□Change
VP_	Annelis C. Movales		
		8440 Tradeport Drive Suite 107 Orlando, Fl 328	□Remove
		Svite 107 Orlando, Fl 328	327 □Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□ Change

	<del></del>
an effectiv ote:   If th	date, if other than the date of filing:
record sp is filed.	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
nted	Settember 11th 2023
	Signature of a member or authorized representative of a member