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COVER LETTER

Registration Section Division of Corporations

TO:

	HOME SERVICES LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	DAVID L. TABER JR		
		Name of Person	
	CONTRACTOR LICENS	SING INC.	
		Firm/Company	<u> </u>
	P. O. BOX 2122		. ~1
	-	Address	
	MARCO ISLAND, FL 3	4146	
		City/State and Zip Code	
	DAVID@CONTRACTOR	RLICENSINGING.COM	
	E-mail address: (to be used for future annual report no	tification)
For further information c	oncerning this matter, please c	all:	<u>ک</u> ۱
DAVID L. TABER JR.		239 394-2300	
Name o	f Person		ne Telephone Number
Enclosed is a check for the	he following amount:		
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration 9 Division of C P.O. Box 632 Tallahassee,	Section Corporations 27	Street Address: Registration Se Division of Co The Centre of 2415 N. Monre Tallahassee, F	orporations Tallahassee oe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ENTHEOS HOME SERVICES LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

A. If amending name, enter the new name of the limited liability company here: CORNERSTONE HEATING & COOLING LLC	
Florida document number L21000445422 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: CORNERSTONE HEATING & COOLING LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "	
A. If amending name, enter the new name of the limited liability company here: CORNERSTONE HEATING & COOLING LLC	
CORNERSTONE HEATING & COOLING LLC	
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "	
	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
	<u>-</u>
	•
Enter new mailing address, if applicable:	٠,٦
(Mailing address MAY BE A POST OFFICE BOX)	23
	·
B. If amending the registered agent and/or registered office address on our records, en	ter the name of the new regist
agent and/or the new registered office address here:	
Name of New Registered Agent:	
New Registered Office Address:	·
Enter Florida street ad	ldress
	. Florida Zip Code
City New Registered Agent's Signature, if changing Registered Agent:	Zip Code

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
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			□Remove
			□Change
			□Remove
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effective date is e: If the date	f other than the date s listed, the date must be s inserted in this block of tive date on the Depart	pecific and cannot be pri does not meet the app	licable statutory fili	(option more than 90 days after f ng requirements, this	iling.) Pursuant to 605.020

Filing Fee: \$25.00