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2023 JAN -3 PH 3:31 SECRETARY OF STATE

COVER LETTER

Division of Corpo	rations			
SUBJECT: AIRN	NeTRIX (00)	LING HEATING Sted Liability Company	DUAS LLC	
The enclosed Articles of Art	nendment and fee(s) are subr	nitted for filing.		
Please return all correspond	ence concerning this matter t	to the following:		
	6ERARI	Name of Person		
		Firm/Company	2023 JAN -3 SECRETARY TALLAHA	
	1885WE	EXORA TERR	TARY AHAS	entation rate of
	PORT SAINT		1953 FR 3:3	Ö
	AIRMETR'	1 X O 1 C OVD. CO 1 to be used for future annual report notifi	Cation)	
For further information con	cerning this matter, please ca	all:		
GERARDO Name of F	PAGAA	at (561) 313 - Area Code Daytime	- 4855 Telephone Number	
Enclosed is a check for the	following amount:			
□ \$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 (additional copy is enclosed)	

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327

TO:

Registration Section

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 OF

AIR METRIX COOLING HEATING & DUTS UL (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Florida document number <u>LJ2 000</u>		were filed on <u>FEB</u>	, 202 25 ALL,	and JAP	gned
This amendment is submitted to amend the f	ollowing:		A. A	-3	Plantes
A. If amending name, enter the new name	e of the limited liabi	lity company here:	, 05 S L	PH 3:	
The new name must be distinguishable and contain the	e words "Limited Liabili	ty Company," the designation "LI	C" or the abbrevi	ation L.L.	.C." -
Enter new principal offices address, if app (Principal office address MUST BE A STR		PORT SAINT	LUCIE 3495		_
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	CE BOX)	FLORIDA 188 SW EX PORT SAINT FIORIDA			
B. If amending the registered agent and/o agent and/or the new registered office add	or registered office a <u>Iress here</u> :	ddress on our records, <u>ent</u>	er the name of	the new	registered
Name of New Registered Agent:			 		·
New Registered Office Address:	1885	Enter Florida street add	ERR ress		
	PORT SALV	TLUCIE,	Florida 30	195 Zip Code	3

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>Address</u> Name Type of Action AMBR AHMAD NASIF 2711 COOPER WAY LAND WEIRAGTON FL, 33414 Kemove __ ∐Change _____ 🗆 🗀 Add □Remove _____ []Change □Change ____ 🗆 Remove _____ UChange _____ 🗀 Add

__ ⊟Remove

If amending any other information, enter change(s) here: (Attach addition	
	
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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 mor Note: If the date inserted in this block does not meet the applicable statutory filing document's effective date on the Department of State's records.	(optional) te than 90 days after filing.) Pursuant to 605.0207 (interpretation of the listed as the control of the listed as the
e record specifies a delayed effective date, but not an effective time, at 12:01 a.m. or rd is filed.	n the earlier of: (b) The 90th day after the
Dated DEC 26 2022. Signature of a member or authorized representative of	of a member
Signature of a member or authorized representative of a member of authorized representative of the state of t	