L22000224938

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COVER LETTER

TO:

TO: Registration Se Division of Cor				
SURJECT: SUNFLOI	HEATING AND COOL AIR, I	.I.C		
		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:		
	FRANCIS FASCO		****	,
		Name of Person		;
	SUNFLO CONSRTUCTION	ON GROUP INC		
	3011 20 0013110011	Firm/Company		
				:
	PO BOX 166564	Address		
		ridatess		1
	MIAMI, FL 33116			
		City/State and Zip Code		
	FASCO@GOSUNFLO.CO	M to be used for future annual report no	tification)	
For further information c	oncerning this matter, please of	•	(incation)	
FRANCIS FASCO		at (305) 606-8128		
	f Person		me Telephone Number	
Enclosed is a check for the	ne 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 Addres Registration S		<u>Street Address:</u> Registration Se	ection	
Division of C		Division of Co		
P.O. Box 632	27	The Centre of	Tallahassee	
Tallahassee, FL 32314		2415 N. Monro	oe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SUNFLO HEATING AND COOL AIR, LLC			
(Name of the Limited Liability Company as it now appears (A Florida Limited Liability Company)	on our records.)		
The Articles of Organization for this Limited Liability Company were filed on MA	ıY 13, 2022	_ and assi	gned
Florida document number 22000224938			
his amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liability company her	<u>re</u> :		
the new name must be distinguishable and contain the words "Limited Liability Company," the de	signation "LLC" or the abbrev	riation "L.I.	C."
Inter new principal offices address, if applicable:			
Principal office address MUST BE A STREET ADDRESS)	.1	1 18	· · · · · · · · · · · · · · · · · · ·
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nter new mailing address, if applicable:	<u> </u>	<u>:</u> .*	
Mailing address MAY BE A POST OFFICE BOX)		် ထ	
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			-
3. If amending the registered agent and/or registered office address on our regent and/or the new registered office address here:	cords, <u>enter the name o</u>	f the new	registe
Name of New Registered Agent:			
New Registered Office Address:			
Enter Flori	da street address		
	Florida		

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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
AMBR	ANDREW ERVIN	1228 NW 37TH AVE	□Add
		CAPE CORAL, FL 33993	
			□Change
			□ Add
			Remove
			☐ Change
			□ Add
			☐Change
			—————————————————————————————————————
			Remove
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P.CC	The date of all and a second as a CCU.		
(If an e	ive date, if other than the date of filing:	er filing.) Pursuant to 60:	5.0207 (3)
	If the date inserted in this block does not meet the applicable statutory filing requirements, then is effective date on the Department of State's records.	his date will not be list	ted as the
the reco	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: led.	(b) The 90th day afte	er the
_	JULY 11th . 3023		
Date			
Dated	The suite sum to		

Typed or printed name of signee