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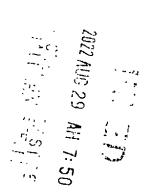
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A. BUTLER
DEC - 3 2022

COVER LETTER

Tallahassee, FL 32314

	tration Section of Corpor				
SHRIFCT:	RE	ERICOOL AIR	CON	DIUNING LC	
3003DC1		Name of I	imited 1.	iability Company	
The enclosed A	articles of Am	nendment and fee(s) are s	ubmitte	d for filing.	
Please return al	l corresponde	ence concerning this mat	er to the	following:	
			BRA	Name of Person	
				Name of Person	
		REFLI C	OUL	AIL CONDIONING Firm/Company	LLC
		·		Firm/Company	
		8443 7	ORT	LANDX ASTIRE DA	LIVE
				Address	
		ORVAR	OW	FL 32829.	
	-	BLAYAN E-mail addres	RID C	S.21@ HUTMAU. C	OM:
For further info	rmation conc	erning this matter, please	e call:		
(BRAYA	RIOSRIVERA		at (862) 247	3164
	Name of Pe			Area Code Daytime	Telephone Number
Enclosed is a ch	neck for the f	ollowing amount:			
☑ \$25.00 Fili	ng 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)
	i <u>e Address:</u> stration Sec	tion		Street Address: Registration Sec	tion
Divis	ion of Corp			Division of Com	orations
P.O. 1	Box 6327			The Centre of Ta	ıllahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

REFRI WOLL AIR WA	v as it now appears on our record 29 1/4 7: 50
(<u>Name of the Limited Liability Compan</u> (A Florida Limited Li	y as it now appears on our records 9 4/1 7: 50
The Articles of Organization for this Limited Liability Company v Florida document number <u>L02000298028</u>	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	ity company here:
REFRI COOL AIR CONDITIONING The new name must be distinguishable and contain the words "Limited Liability"	LIMITED LABILITY CONPANY by Company," the designation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	8443 PORT LANDCASHIRE DRIVE ORLANDO FL 32829.
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office at agent and/or the new registered office address here:	ddress on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
	City Zin 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 added or removed from our records:

MGR = Manager

	-	
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			□Add
			□Remove
			☐ Change
			□ Add
			□ Remove
			☐ Change
			□ Add
			□Remove
			□Change
			□ Add
			□Remove
			□Change
			□ Add
		□Remove	
			□Change
			□Add
			□Remove
			□Change

. If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	I AM REDUESTING THIS AMENDMENT TO COMECT THE NAME
	OF MY BUSINESS, THE WALECTION SHOULD BE MADE
	ON "CONDIONING PLEASE CHANGE TO CONDITIONING."
	OF MY BUSINESS, THE WARECTION SHOULD BE MADE ON "CONDIONING" PLEASE CHANGE TO "CONDITIONING." THE BUSINESS NAIVE WAS MISSPELLED FROM THEORIGINAL
	RE WISTRATION.
	THANK YOU IN ADVANCE.
-	
Note:	tive date, if other than the date of filing: 08-01. QQ. (optional) fective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3) If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ment's effective date on the Department of State's records.
the recor	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the led.
Dated	JAC. USAR)
	Signature of a member or authorized representative of a member
	BRAYAN RIOG RIVERA. Typed or printed name of signee