

L22 000 318 632

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

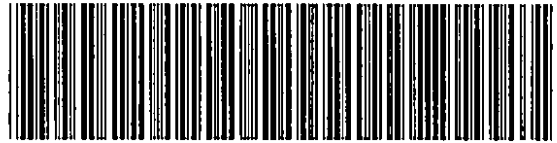
(Business Entity Name)

(Document Number)

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10/11/22--01027--019 \*\*30.00

2023 JAN 23 AM 11:29  
CLERK OF STATE  
TALLAHASSEE, FL.

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 10, 2023

CODY JONES  
6284 SW 39TH ST.  
PALM CITY, FL 34990

SUBJECT: DUCTZ IN A ROW LLC  
Ref. Number: L22000318632

2023 JAN 23 AM 11:29  
DIVISION OF STATE  
TALLAHASSEE, FL

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We have received your document for DUCTZ IN A ROW LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A Florida limited liability company cannot convert into another Florida limited liability company. Pursuant to s. 605.0102(23)(a), F.S., "the term 'other business entity' or 'another business entity' means a common law or business trust or association; a real estate investment trust; a general partnership, including a limited liability partnership; a limited partnership, including a limited liability limited partnership; or any other domestic or foreign entity that is organized under a governing law or other applicable law, provided such term shall not include a domestic limited liability company."

You can file an amendment to change the name on your existing LLC.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tammi Cline  
Regulatory Specialist II Supervisor

Letter Number: 623A00000736

2023 JAN 23 PM 12:54

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Ductz In A Row LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Cody Jones  
Name of Person  
Ductz In A Row LLC  
Firm/Company  
6284 SW 39th St.  
Address  
Palm City, FL, 34990  
City/State and Zip Code  
~~Palm City, FL~~ PalmCityDUS@GMAIL.COM  
E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE  
TALLAHASSEE, FL

2023 JAN 23 AM 11:29

FILED

For further information concerning this matter, please call:

Cody Jones at (772) 380-3426  
Name of Person Area Code Daytime 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)

↑  
Already Paid.  
See attached letter.

Mailing Address:

Registration Section  
Division of Corporations  
P.O. Box 6327  
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

Durtz In A Row LLC

(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 Liability Company were filed on 7/19/22 and assigned  
Florida document number L22000318632

SECRETARY OF STATE  
TALLAHASSEE, FL

2023 JAN 23 AM 11:29

FILED

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Palm City Dryer Vent Services 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:

N/A

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

N/A

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

N/A

New Registered Office Address:

Enter Florida street address

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 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>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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CLERK OF DISTRICT COURT  
TALLAHASSEE, FL

2023 JAN 23 AM 11:29  
SECURITY OF STATE  
TALLAHASSEE, FL

2023 JAN 23 AM 11:29  
DEPT. OF STATE  
TALLAHASSEE, FL

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**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated January, 17<sup>th</sup> 2023

Corey Jones  
Signature of a member or

Signature of a member or authorized representative of a member

Cody Jones  
Typ

Typed or printed name of signee

**Filing Fee: \$25.00**