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(((H22000421519 3)))



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Email Address: kathy@apiprocessihng.com

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN COASTAL EDGE HEATING AND COOLING LLC

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Fax Server



December 16, 2022

FLORIDA DEPARTMENT OF STATE

COASTAL EDGE HEATING AND COOLING LLC 7901 4TH ST N STE 300 ST. PETERSBURG, FL 33702US

SUBJECT: COASTAL EDGE HEATING AND COCLING LLC

REF: L22000450241

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refax this document until the quality has been improved.

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

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Agnes Lunt Regulatory Specialist III

FAX Aud. #: H22000421519 Letter Number: 822A00028135

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



COASTAL EDGE HEATING AS	ND COOLING LLC
(Nume of the Limited Liability Company as it now (A Florida Limited Liability Com	y appears on our records.) apany)
The Articles of Organization for this Limited Liability Company were filed Florida document number	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability comp	eany here:
The new name must be distinguishable and contain the words "Limited Liability Compan	y," 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> <u></u>
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
· .	
B. If amending the registered agent and/or registered office address or agent and/or the new registered office address here:	our records, <u>enter the name of the new registered</u>
Name of New Registered Agent:	
New Registered Office Address:	
E	nter Florida street address
	, Fiorida
City	Zip Cinle
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent and agree to act is provisions of all statutes relative to the proper and complete performa accept the obligations of my position as registered agent as provided fiving filed to merely reflect a change in the registered office address, a company has been notified in writing of this change.	nce of my duties, and I om familiar with and or in Chapter 605, F.S. Or, if this document is

ff 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>	Name	Address	Type of Action
AMBR	JOHN A. ROMANO, JR.	89 SE 24th AVENUE	= Add
		CROSS CITY, FL 32628	
			□Change
			DAdd
			Remove
		- 17 - 17 - 1	□Change
			Remove
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