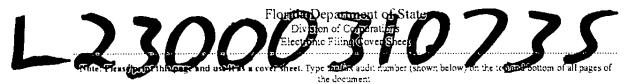
11/3/23, 9:59 AN To: +1 850-617-6383 From: +1 407-270-4846

11/3/23, 8:57 AM Division of Corporations



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Note: DO NOT hit the REFRESH/RELOAD button on your prowser from this page. Doing so will generate another cover sheet

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To:		
	Division of Corporations	
	Fax Number : (850)617-638}	
From:		
	Account Name : TAX LINKS CONSULTANTS LLC	
	Account Number : 120220000146	
	Phone : (497)279-4846	
	Fax Number : (487)279-4846	
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	LOPEZ HVAC LLC.	-
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Help

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# **COVER LETTER**

(((H23000382550 3)))

TO: Registration Se Division of Cor			
LOPEZ HV	/AC LLC.		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
	ondence concerning this matter		
	LOPEZ, MARVIN M		
		Name of Person	
		MakinFi	
	<u> </u>	Firm/Company	
	6220 HILLWOOD DR		
		Address	
	ORLANDO, FL 32809		
		City/State and Zip Code	<del></del>
	LOPEZ.COMPANY502@C	JMAIL.COM to be used for future annual report n	The Control of the Co
For further information o	concerning this matter, please or		otheatony
MAR VIN M LOPEZ		407 627-7464	
Name o	of Person	at () Area Code Days	time Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	S30.00 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		Street Address:	
Registration by Division of C		Registration S Division of C	
P.O. Box 633		The Centre of	

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(((H23000382550 3)))

LOPEZ HVAC LLC. (Nume of the Limited Liability Com (A Florida Limite	ipany as it now appears on o	ur records.)
The Articles of Organization for this Limited Liability Compare Florida document number L23000310735		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lis	ability company here:	
The new name must be distinguishable and contain the words "Limited Lia Enter new principal offices address, if applicable:	ability Company," the designat	ion "LLC" or the abbreviation "L.L.C."
(Principal office address MUST BE A STREET ADDRESS)		
Trucque office maires MOST DE 11 STREET ADDITION		:
		:
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		<u></u>
B. If amending the registered agent and/or registered offic agent and/or the new registered office address here:	e address on our record	s, enter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida stre	et address
	City	, Florida 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.

□ 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			(((H23000382550 3)))
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	LOPEZ, MARVIN M	6220 HILLWOOD DR	
		ORLANDO, FL 32809	□Remove
			□Change
			□ Add
			🔲 Remove
			[] Change
			🖸 Add
			Remove
			Change
			□ Add
			□Remove
			□ Change
		<del></del>	
			□Remove
			Change
			□Remove

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# Page 2 of 3

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e record specifies a delayed e The 90th day after the record		an effective time,	at 12:01 a.m. on th	e earlier of:
November 03	2023	_·		
	Valla	Ä		
Sign	gnature of a member or authors	zed representative of a m	em ber	
	MARVIN M	I OPE7		
	Typed or printed			<u>.</u>

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Filing Fee: \$25.00