Ġ'n.

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000019825 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : HUBCO

Account Number : 104662003400 Phone : (516)813-1184 Fax Number : (516)935-3088

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: jamesschneider1016@gmail.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN: CLEAN AIR HEATING AND AIR CONDITIONING LLC

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T. LEMIEUX

JAN 17 2024

ARTICLES OF AMENDMENT TO ** ARTICLES OF ORGANIZATION OF

CLEAN AIR HEATING AND AIR CONDITIONING LLC

H24000019825

(Name of the Limited Liability Com (A Florida Limited	pany as it now appears of Liability Company)	n our records.)		
The Articles of Organization for this Limited Liability Compare Florida document numberL23000557643	y were filed on	12/20/2023	and assigned	
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited lia	bility company here	:		
INSTANT COMFORT HEAT				
The new name must be distinguishable and end with the words "Limited Li	ability Company," the des	ignation "LLC" or the ab	breviation "L.L.C."	
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRESS)				
Enter new mailing address, if applicable:		<u> </u>		
(Mailing address MAY BE A POST OFFICE BOX)			Annum al lub	
			/ C1	
		; , *		
B. If amending the registered agent and/or registered registered agent and/or the new registered office address have		ur records, <u>enter t</u> : 	he name of the new	
Name of New Registered Agent:				
New Registered Office Address:	Enter Florida	street address		
	Eiger Fiorial sireel 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.

if Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

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16-Jan-2024 13:20 Fax

> If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

> > H24000019825

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MGR = AMBR =	MGR = Manager AMBR = Authorized Member					
<u>Title</u>	<u>Name</u>	Address	Type of Action			
			□ Add			
			☐ Remove			
			П Remove			
			□ Remove			
			□ Remove			
			Remove			
			□ Remove			

D.	If amen	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
		H24000	0019825
	_		
	-		
E.	Effectiv	ve date, if other than the date of filing: (optional)	
	(The effect	ctive date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after this document is filed by the Florida Department of State)	
	Dated _	January 15, 2024	
		Juni Juni	
		Signature of a member or authorized representative of a member	
		James N. Schneider	
		Typed or printed name of signee	

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