

L24000093695

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

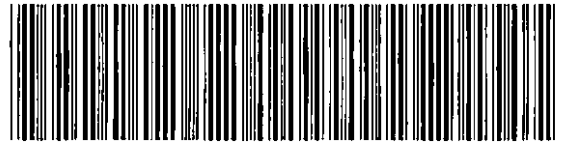
(Document Number)

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J. HORNE
OCT 21 2024

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10/02/24--01022--024 **25.00

2024 OCT -2 PM 12:16

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SALT AIR CLIMATE CARE 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:

ROBERT MCCULLOCK

Name of Person

SALT AIR CLIMATE CARE LLC

Firm/Company

738 FORESTERIA DRIVE

Address

LAKE PARK, FL 33403

City/State and Zip Code

THETAXMARSHALL@AOL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JENNIFER MCWILLIAMS

561 888-4133

at (_____) _____

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)

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

2024-07-22 PM 12:16

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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>
MGR	JENNIFER MCWILLIAMS	738 FORESTERIA, LAKE PARK, FL 33403	☒ Add
			☐ Remove
			☐ Change
MGR	ROBERT MCCULLOUGH	738 FORESTERIA, LAKE PARK, FL 33403	☒ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

WE TRIED TO AMEND TO SIMPLY ADD ROBERT LAST TIME. THE RESULT WAS THE REMOVAL
OF JENNIFER AND THE ADDITION OF ROBERT. THIS TIME WE WOULD WISH TO ADD JENNIFER
WITHOUT REMOVING ROBERT

E. Effective date, if other than the date of filing: _____ **(optional)**

(If an effective 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)(b)

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.

If the record 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 record is filed.

Dated SEPTEMBER 23, 2024



Signature of a member or authorized representative of a member

ROBERT MCCOLLOUGH

Typed or printed name of signee