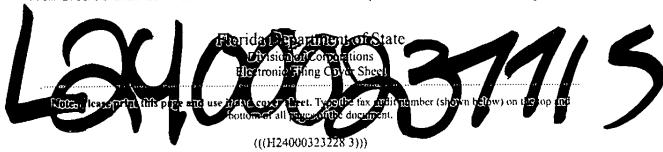
From License Exam Services LLC 1.866.473.0571 Mon Sep 23 10:44:57 2024 MDT Page 1 of 7





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Division of Corporations

Fax Number : (8

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From:

Account Name : LICENSE EXAM SERVICES

Account Number : I20120000042 Phone : (941)685-0955 Fax Number : (866)473-0571

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

Email Address: 2022mhi@GMAIL.COM

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COVER LETTER

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	Registration So Division of Co					
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SUBJEC	.1:	Name of Lin	nited Liability Company	· ·		
The encl	osed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please re	turn all correspo	ondence concerning this matter	to the following:			
		M AIR CONDITIONING, LLC Name of Limited Liability Company les of Amendment and fee(s) are submitted for filing. rrespondence concerning this matter to the following: Mike Hanrahan Name of Person T & M AIR CONDITIONING, LLC Firm/Company 670 SW 34TH STREET Address PALM CITY, FL 34990 City/State and Zip Code 2022mhl@GMAIL.COM E-mail address: (to be used for luture annual report notification) tion concerning this matter, please call: OR at (941) Area Code Daytime Telephone Number cfor the following amount: Fee S 30.00 Filing Fee & Certificate of Status Certificate of Status Certified Copy fadditional copy is enclosed) address: Street Address:				
			Name of Person			
		T & M AIR CONDITION	ING, LLC			
			Firm/Company			
		670 SW 34TH STREET				
		***************************************	Address	***************************************		
		PALM CITY, FL 34990				
			City/State and Zip Code	***************************************		
		-				
For furth	er information c		•	stitication)		
ROBIN	O'CONNOR		at (941) 706-2336			
	Name c	of Person	Area Code Dayti	me Telephone Number		
Enclosed	is a check for t	he following amount:				
图 \$2 5.0	00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy		
	Malling Addres			ection		
Registration Section Division of Corporations			Registration Section Division of Corporations			
	P.O. Box 632		The Centre of			
	Tallahassee, I	FL 32314	2415 N. Monn	oe Street, Suite 810		

Tallahassee, FL 32303

From License Exam Services LLC 1.866.473.0571 Mon Sep 23 10:44:57 2024 MDT Page 5 of 7

ARTICLES OF AMENDMENT(((H24000323228 3))) ARTICLES OF ORGANIZATION **OF**

T & M AIR CONDITIONING, LLC		
(Name of the Limited Liability Com (A Florida Limite	pany as it now appears on our deal Liability Company)	r records.}
he Articles of Organization for this Limited Liability Compar		
lorida document number L24000237715		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited li-	ability company here:	
he new name must be distinguishable and contain the words "Limited Lie	ibility Company," the designati	ion "LLC" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		10, 23
)24
nter new mailing address, if applicable:		23
Mailing address MAY BE A POST OFFICE BOX)		·C P IN
		22
. If amending the registered agent and/or registered offic gent and/or the new registered office address here:	e address on our records	i, enter the name of the new regist
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida stre	et addrexs
		Florida

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

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If amending Authorized Person(s) authorized to manage, enter the title, name, and address of person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
MGR	DANIEL L. BREWSTER	4 GARDEN LANE	□Add
		TAMPA, FL 33610	※ Remove
		····	
			□ Add
			□Кетюче
			☐ Change
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<u>iote:</u> If	e date, if other to tive date is listed, the the date inserted it's effective date	in this block do	es not me	et the applic	able statutor	ng or more than y filing requi	optio 90 days after rements, this	nal) filing.) Pursuant t date will not b	o 605.020 e listed a
record s l is filed	specifies a delayer L	d effective date	, but not a	in effective t	ime, at 12:01	a.m. on the	earlier of: (b)	The 90th day	after the
ated _	EPTEMBER 20	14.	<del></del> ,	2024	·				
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