Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H13000214425 3)))



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Division of Corporations

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LLC REGISTERED AGENT CHANGE AMERICAN REFRIGERATION, LLC

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Corporate Filing Menu

Electronic Filing Menu

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COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT:	American Refrigeration, LLC				
Name of Limited Liability Company					
Dear Sir or M	ladam:				
The enclosed	Registered Agent/Registered Of	fice Change and fee(s) are submitted for filing.			
Please return	all correspondence concerning th	uis matter to the following:			
510	Name of Person				
AMERICAN REFRIGERATION Firm/Company					
11572 DAVIS CREEK COURT					
TACKSON VILLE FL 32258 City/State and Zip Code					
aplummer & American Refrigeration 45a. Com E-mail address: (to be used for future annual report notification)					
For further in	formation concerning this matter	, please call:			
Angle Aummer at (904) 880-4888					
_	Name of Person	Area Code & Daytime Telephone Number			
Registi Divisio Clifton 2661 E	ET/COURIER ADDRESS: ration Section on of Corporations n Building Executive Center Circle assee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tailahassee, Florida 32314			
Enclosed is a check for the following amount:					
⊠ \$25	5 Filing Fee	☐ \$55 Filing Fee & Certified Copy			

9/26/2013 9:20:05 Fram: To: 8506176383

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9/26/2013 8:21:30 AM PAGE 1/001 Fax Server



September 26, 2013

FLORIDA DEPARTMENT OF STATE Division of Corporations

AMERICAN REFRIGERATION, LLC 11572 DAVIS CREEK COURT JACKSONVILLE, FL 32256

SUBJECT: AMERICAN REFRIGERATION, LLC

REF: L98000001918

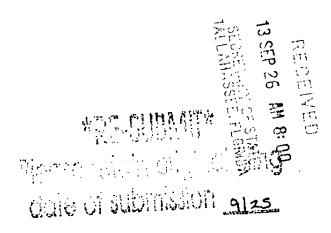
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Tammy Hampton Regulatory Specialist III Registration/Qualification Section

FAX Aud. #: B13000213797 Letter Number: 513A00022602



114 , 1947/17801 \ Walters Elimen Ordina

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608 liability company submits the following statement in or agent, or bolh, in the State of Florida.	8.508, Florida Statutes, the undersigned limited der to change its registered office or registered	
1. Name of the limited liability company: American Refri	geration, LLC	
2. (a) Principal office address of limited liability compa (Note: MUST BE STREET ADDRESS)	y: 11572 DAVIS ÇREEK COURT JACKSONVILLE, FL 32256	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	JACKSONVILLE, FL 32256	
09/21/1998	L980Q0001918	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown of	n the records of the Florida Dept. of State:	
Registered Agent:	CORPORATE CREATIONS NETWORK INC.	
Registered Office Address:	11380 PROSPERITY FARMS ROAD #221E PALM BEACH GARDENS, FL 33410	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>N</u>	EW Registered Office address:	
NEW Registered Agent:	C T Corporation System	
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1200 South Pine Island Road	
(MOST BE FLORIDA STREET ADDRESS)	Plantation ,FL 33324	
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be ide liability company, it is hereby confirmed that the change the members of the limited liability company or as other the operating agreement of the limited liability company	Florida street address of the registered office entical. Or, in the case of a Florida limited (s) was/were authorized by an affirmative vote of wise provided in the articles of organization or	
Signature of a member or amborized representative of a member	<u></u>	
Printed or typed name of signee		
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of my Chapter 608, F.S. Or, if this document is being filed to address, I hereby confirm that the limited liability complete CT Corporation System By:	d agree to act in this capacity. I further agree to proper and complete performance of my duties, position as registered agent as provided for in merely reflect a change in the registered office any has been notified in writing of this change.	
Signature of Registered Agent	Assistant Secretary	
Division of Corporations, P.O. Box FILING FEE:	\$25.00	
INHS18 (05/08)		