https://etile.sunbiz.org/scripts/etilcovr.exe



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.

(((H17000274585 3)))



H170002745853ABC6

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

: CORPORATE CREATIONS INTERNATIONAL INC. Account Name

Account Number : 110432003053 : (561)694-8107 Phone

: (561)6945-1639-Fax Number

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

Email Address:\_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PARACO SOUTH LLC

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$55.00

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O GRANO 10/18/17, E11 PM

To: Florida Page 2 of 7

2017-10-19 20:41:34 (GMT)

15618282262 From: Sarah Eichelsdoerfer

850-617-6381

10/19/2017 10:07:19 AM PACE

1/001 Fax Server

3.



October 19, 2017

FLORIDA DEPARTMENT OF STATE Division of Corporations

PARACO SOUTH LLC 2526 PLANTATION CENTER DR SUITE A MATTHEWS, NC 28105

SUBJECT: PARACO SOUTE LLC

REF: M17000006496

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

NEED EITHER CERTIFIED COPY OF AMENDMENT FILED IN HOME STATE OR A CERTIFICATE SHOWING BOTH OLD AND NEW NAMES

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Stacey M Warren Regulatory Specialist II FAX Aud. #: H17000274585 Letter Number: 317A00021112 TO: Registration Section

### **COVER LETTER**

Division of Corporations	
SUBJECT: PARACO SOUTH LLC	
Name of Foreign Limited Liab	offity Company
Dear Sir or Madam:	
The enclosed application, certificate and fee(s) are submitted	for filing.
Please return all correspondence concerning this matter to the	following:
Carla J. Vinetti-Ketcham	
Name of Person	-
Colby Attorneys Service Co., Inc.	
Firm/Company	_
111 Washington Ave., Ste. 703	
Address	-
Albany NY 12210	_
City/State and Zip Code	
carla@colbyservice.com	th
E-mail address: (to be used for future annual report notifice	ation)
For further information concerning this matter, please call:	022 4220
Carla J. Vinetti at (800  Name of Person Area Code	832-1220 e & Daytime Telephone Number
Name of Person Area Cour	e 25 Daytime Telephone (Volume)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amount:  S25 Filing Fee \$\sum \$30 Filing Fee & Certificate of Status \$55 Fil  CR2E055 (9/15)	ing Fee & S60 Filing Fee, ed Copy Certificate of Status Certified Copy

#### APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

#### SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of	
State: PARACO SOUTH LLC	$\preceq$
Enter new principal office address, if applicable:  (Principal office address	0CT
(Principal office address MUST BE A STREET ADDRESS)	. 写
Enter new mailing address, if applicable:  (Mailing address  MAY BE A POST OF FICE BOX)	. (#. - -
2. The Florida document number of this limited liability company is: M1700006496	-
3. Jurisdiction of its organization: Delaware	··•
4. Date authorized to do business in Florida: 07/28/17	_
SECTION II (5-9 complete only the applicable changes)	
5. Now name of the limited liability company: AMERICAN CYLINDER EXCHANGE LLC (must contain "Limited Liability Company, " "L.L.C.," or "LLC.	<del>.</del> ")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attact copy of the written consent of the managers or managing members adopting the alternate name. The alternate must contain "Limited Liability Company," "L.L.C." or "LLC.")	i a iame
6. If amending the registered agent and/or registered officer address on our records, enter the name of the new registered agent and/or the new registered office address here:	
Name of New Registered Agent:	_
New Registered Office Address:  Enter Florida Street Address	_
****	
	-
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 compl	y with

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 mereby reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

<u>Name</u>	Address	Type of Action
		Add
		Remove
	·	17 bCT 19
		Remaye  Add
	<del> </del>	Remove
		Add
		Remove
		Add
endment(s), duly authenticated ac law of which this entity is or	by the official having custody of records in the ganized.	Remove
	cate, if required: no more than indment(s), duly authen:icated ie law of which this entity is or	cate, if required: no more than 90 days old, evidencing the endment(s), duly authenticated by the official having custody of records in the law of which this entity is organized.  Carly Wusttu  Signature of the authorized representative

Filing Fee: \$25.00

# Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF 'PARACO SOUTH LLC'.

CHANGING ITS NAME FROM "PARACO SOUTH LLC" TO "AMERICAN CYLINDER EXCHANGE LLC", FILED IN THIS OFFICE ON THE SEVENTEENTH DAY OF OCTOBER, A.D. 2017, AT 1:36 O'CLOCK P.M.



Authentication: 203428053

Date: 10-19-17

5064570 8100 SR# 20176701282

You may verify this certificate online at corp.delaware.gov/authver.shtml

To: Florida Page 7 of 7

State of Debware	Secretary of State		
Division of: Corporations	Delivered	01:36 PM 10/17/2017	
FILED	01:36 PM 10/17/2017		
SR	20176654581	FileNamber	5064570

## STATE OF DELAWARE CERTIFICATE OF AMENDMENT

as follows:	
	irst which speaks of the name of the bility company is hereby amended to reac
77	name of the limited liability company is
	LINDER EXCHANGE LLC
	LINDER EXCHANGE LLC
AMERICAN CY	
american cy in witness w	HEREOF, the undersigned have executed this Certificate
american cy in witness w	
american cy in witness w	HEREOF, the undersigned have executed this Certificate day of October , A.D. 2017
AMERICAN CY	HEREOF, the undersigned have executed this Certificate day of October A.D. 2017