M22000018532

(Req	uestor's Name)	
(Address)		
(Address)		
(City	/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	Certificates	of Status
Special Instructions to Filing Officer:		

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Account#: I2000000088

Date:(06/02/2023		
	arcel Ogbonna-Amu	_	
Reference #:_	2011554	_	
Entity Name:	FIRSTCALL RE	FRIGERATION, I	LC
☐ Articles	s of Incorporation/Authorization Iment	to Transact Business	
🗌 Chang	e of Agent		ANY ISSUES, CALL MARCEL:
🗌 Reinsta	atement		(518) 213 - 0826
Conve	rsion		Thank you!
Merger			
🗌 Dissolu	ution/Withdrawal		
Fictitio	us Name		
Other_			
Authorized Ar	nount: \$25.00		

Signature: ______

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 appea	irs on the records	of the Florida Department of
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State: JAX FCF SERVICES, LLC

5une:	
Enter new principal office address, if applicable	e: <u>N/A</u>
(Principal office address	
<u>MUST BE A STREET ADDRESS</u>)	۲۰ ۸۰۰۰ ۲۰۱۰
Enter new mailing address, if applicable:	
(<u>Mailing address</u> MAY BE A POST OFFICE BOX)	
<u>MAT BE A FUST OFFICE BUX</u>	
2. The Florida document number of this limited	l liability company is: M22000018532
3. Jurisdiction of its organization: DELAWAR	
 Date authorized to do business in Florida: <u>D</u> 	DECEMBER 13, 2022
SECTION II (5-9 complete only the applicat	ole changes)
5. New name of the limited liability company:	FirstCall Refrigeration. LLC
(n	nust contain "Limited Liability Company, ""L.L.C.," or "LLC.")
	oted for the purpose of transacting business in Florida and attach a managing members adopting the alternate name. The alternate name. L.C." or "LLC.")
If amending the registered agent and/or regis registered agent and/or the new registered office	stered officer address on our records, <u>enter the name of the new</u> e address here:
Name of New Registered Agent: N/A	
New Registered Office Address: N/A	Enter Florida Street Address
-	, Florida City 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

 7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction: N/A

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 If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change: N/A

Title/ Capacity	Name	Address	Type of Action
			□Add
			🗆 Remove
			□Add
			🗆 Remove
<u> </u>			🖸 Add
			CRemove
			🗆 Add
			🗆 Remove
		. <u>.</u>	🗆 Add
aforementioned	er the law of which this entity is organ	the official having custody of records in	 1971 (31
	EVAN EACHUS, CEO	ed name of signee	PH 12: 36 SALES FL
		ee: \$25.00	



Page 1

The First State

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 "JAX FCF SERVICES, LLC", CHANGING ITS NAME FROM "JAX FCF SERVICES, LLC" TO "FIRSTCALL REFRIGERATION, LLC", FILED IN THIS OFFICE ON THE TWENTY-SIXTH DAY OF MAY, A.D. 2023, AT 5:06 O'CLOCK P.M.



Authentication: 203447492 Date: 05-31-23

7162806 8100 SR# 20232446455

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

STATE OF DELAWARE CERTIFICATE OF AMENDMENT

- 1. Name of Limited Liability Company: <u>JAX_FCF_SERVICES</u>, LLC
- 2. The Certificate of Formation of the limited liability company is hereby amended as follows:

By Changing its	name to:	
FirstCall Refrig	eration,	LLC
IN WITNESS WHERE	EOF, the und	dersigned have executed this Certificate on

the <u>26th</u> day of <u>May</u>, A.D. <u>2023</u>.

El By:

Authorized Person(s)

Name:__Evan Eachus

Print or Type