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(Cil	y/State/Zip/Phone	e #)
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### **COVER LETTER**

• TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: LAU AIR CON	IDITION SERVICES,	INC.	
DOCUMENT NUM	BER: P03000105666			
The enclosed Articles	of Amendment and fee are sub	omitted for filing.		
Please return all corre	spondence concerning this mat	ter to the following:		
	• •	RMIN LAU		
	(Name of	Contact Person)		
	LAU AIR COND	ITION SERVICES, INC		
	(Firm	n/ Company)		
	16300 SW 1	37 AVE. UNIT 122		
	(	Address)		
	MIAM	I, FL. 33196		
	(City/ Sta	ite and Zip Code)		
	E-mail address: (to be use	ed for future annual report noti	lication)	
For further information	on concerning this matter, pleas	e call:		
FERMIN LAU		at ( 786 ) 299-1	197	
	of Contact Person)	at ( 786 ) 299-1 (Area Code & Day	time Telephone Number)	
Enclosed is a check for	or the following amount made p	payable to the Florida Departm	ent of State:	
▼ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
	ng Address	Street Address Amendment Section	,	
Amendment Section Division of Corporations			Division of Corporations	
P.O. Box 6327 Clifton Building		nter Cirole		
Tallahassee, FL 32314 2661 Executive Center Circle		nier Circie		

Tallahassee, FL 32301



# FLORIDA DEPARTMENT OF STATE Division of Corporations

December 15, 2009

FERMIN LAU LAU AIR CONDITION SERVICES, INC. 16300 S.W. 137TH AVENUE, UNIT 122 MIAMI, FL 33196

SUBJECT: LAU AIR CONDITION SERVICES, INC.

Ref. Number: P03000105666

We have received your document for LAU AIR CONDITION SERVICES, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document you submitted has been prepared pursuant to nonprofit statutes (chapter 617, Florida Statutes). As the entity was originally filed as a corporation for profit, this document should be filed pursuant to chapter 607, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6908.

Sylvia Gilbert Regulatory Specialist II

Letter Number: 209A00038052

#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION:	LAU AIR CO	NDITION S	ERVICES, II	NC
. DOCUMENT NUM		P03000105666			
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all corre	espondence concerni	ng this matter to	the following:		
	·	FERMIN			
		Name of Cont	act Person		
	LAU A	IR CONDITION		INC	
		Firm/ Cor	npany		<del></del> ,
	1630	00 S.W 137TH	AVE, UNIT 12	22	·
		Addre	SS		
		MIAMI, FL			
		City/ State and	Zip Code		
	E-mail address: (to	be used for future a	nnual report notifi	cation)	-
For further information	on concerning this m	atter, please call	:		
FE	RMIN LAU	at (	305	226-8727	
Name of	Contact Person		Area Code & Day	time Télephone Nu	ımber
Enclosed is a check for	or the following amo	unt made payab	le to the Florida	Department of	State:
✓ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	Cer	.75 Filing Fee & tified Copy ditional copy is end	Certit closed) Certit	0 Filing Fee ficate of Status fied Copy itional Copy is enclosed)
Mailing Addr Amendment S Division of Co P.O. Box 6327	ection orporations	Amer Divis	t Address adment Section ion of Corporation on Building	ions	
			Executive Cent	er Circle	

Tallahassee, FL 32301

### Articles of Amendment **Articles of Incorporation** of

## LAU AIR CONDITION SERVICES, INC

Articles of Articles of Articles of Inc Articles of Inc	orporation 2009 DEC
LAU AIR CONDITION SER  (Name of Corporation as currently filed with	the Florida Dant of State (1977)
P03000105666	the Fiorida Dept. of State) 14 ARASSEL 4: 26
(Document Number of Corporat	
Pursuant to the provisions of section 607.1006, Florida Statu amendment(s) to its Articles of Incorporation:	tes, this Florida Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation	<u>n:</u>
N/A	The new
name must be distinguishable and contain the word "corpabbreviation "Corp.," "Inc.," or Co.," or the designation "Coname must contain the word "chartered," "professional associations	orp," "Inc," or "Co". A professional corporation
B. Enter new principal office address, if applicable:	16300 SW 137TH AVE.
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	UNIT 122
	MIAMI, FL. 33196
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	SAME
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office add	
Name of New Registered Agent:	
New Registered Office Address: (Flori	ida street address)
(City)	, Florida(Zip Code)
New Registered Agent's Signature, if changing Registered A	
I hereby accept the appointment as registered agent. I am fami	liar with and accept the obligations of the position.
Ciamatana (Na)	Designational designation of the province
Signature of New	Registered Agent if changing

# If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added: (Attach additional sheets, if necessary) Title ' Name Address Type of Action ☐ Add ☐ Remove ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) N/A F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) N/A

The date of each amendment	t(s) adoption: <u>12/21/09</u>
Effective date <u>if applicable</u> :	(date of adoption is required)
• •	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/we	ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	are approved by the shareholders through voting groups. The following statement and for each voting group entitled to vote separately on the amendment(s):
"The number of votes	cast for the amendment(s) was/were sufficient for approval
by	,"·
• — — — — — — — — — — — — — — — — — — —	(voting group)
action was not required.	re adopted by the board of directors without shareholder action and shareholder action and shareholder action and shareholder action and shareholder
Dated 12/2	1/09 Qus
sele	ra director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)
	FERMIN LAU
	(Typed or printed name of person signing)
	(Title of person signing)