P14000098015

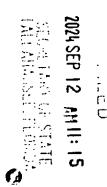
(Requestor's Name)
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(Business Entity Name)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Angelina Air Cond	itioning & Heating Inc	
DOCUMENT NUMB		_	
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Flavio P Gomes		
		Name of Contact Persor	
	Angelina AirConditioning	& Heating Inc	
,		Firm/ Company	
	16574 130th Ave North		
		Address	
	Jupiter, FL 33478		
		City/ State and Zip Code	:
	jupiterbookkeeping1@gma	il.com	
	E-mail address: (to be us	ed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
Flavio P Gomes		aı (275-6070
Name o	of Contact Person	Area Co	le & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 chassee, FL 32314	Amend Divisio The Co	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Angelina Air Conditioning & Heating Inc

(Name of Corporation as current	ly filed with the Florida Dept. of State)		
P14000098015			
(Document Number of	of Corporation (if known)		
Pursuant to the provisions of section 607,1006, Florida Statutes, this	Florida Profit Corporation adopts the fe	llowing amendme	ent(s) to
its Articles of Incorporation:			
A. If amending name, enter the new name of the corporation:			
		The new	·
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.A."	A professional corporation name must	reviation "Corp.,"	•
B. Enter new principal office address, if applicable:	16574 130th Ave North		
(Principal office address MUST BE A STREET ADDRESS)	Jupiter, FL 33478		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	16574 130th Ave North		
	Jupiter, FL 33478		~>
		<u> </u>	924
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address		, AREA	SEP 12
Name of New Registered Agent			
Name of New Registered Agent		<u> </u>	= -
të lavista et	reet address)	—— 2E	<u></u>
[] 417/ (484 .34	recrease con		i ψ
New Registered Office Address:	, Florida,	(Zip Code)	
	1000	(1.1.) (1.1.1.)	
New Registered Agent's Signature, if changing Registered Agent	<u>t.</u>		
I hereby accept the appointment as registered agent. I am familiar	with and accept the obligations of the po.	sition.	
Signature of New F	Registered Agent, if changing		
Check if applicable			
☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11)	(e), F.S.		

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)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: XChange	PT	John Do	<u>e</u>	
X Remove	v	Mike Jo	nes	
X Add	<u>SV</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

ach additional sheets, if necessary).	(Be specific)			
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			,	<u> </u>
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n amendment provides for an exch				
ovisions for implementing the amer (if not applicable, indicate N/A)	dment if not contai	ined in the amendm	ent itself:	
(t) not applicable, materie (VA)				
• •				
				

The date of each amendment(s) a date this document was signed.	adoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file dat	
	(no more than 90 days after amenament file dat	r)
Note: If the date inserted in this document's effective date on the E	block does not meet the applicable statutory filing requireme bepartment of State's records.	nts, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were action was not required.	lopted by the incorporators, or board of directors without share	holder action and shareholder
The amendment(s) was/were ac by the shareholders was/were s	lopted by the shareholders. The number of votes east for the aufficient for approval.	mendment(s)
must be separately provided fo	proved by the shareholders through voting groups. The follow reach voting group entitled to vote separately on the amendment of the the amendment(s) was/were sufficient for approval	ing statement ent(s):
by	(voting group)	
September	5, 2024	
Dated	1	
	km + cu	
Signature	lirector, president or other officer – if directors or officers have	not been
	ed, by an incorporator – if in the hands of a receiver, trustee, or	
	nted fiduciary by that fiduciary)	
	Flavio P Gomes	
	(Typed or printed name of person signing)	
	President	