

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer. |
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COVER LETTER

TO: Amendment Section Division of Corporations

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

| NAME OF CORPORATION: Airco Mechanical Contractors Inc. | |
|---|-------|
| DOCUMENT NUMBER: 523284 59-3045554 | |
| The enclosed Articles of Amendment and fee are submitted for filing. | |
| Please return all correspondence concerning this matter to the following: | |
| Michelle Heffelmire Name of Contact Person Airco Mechanical Contractors, Inc. Firm/ Company Hou Honeyvell Rd Address Largo, Florida 33771 Scity/ State and Zip Code M/h 20 airco - Mechanical Com | |
| E-mail address: (to be used for future annual report notification) | 7 |
| For further information concerning this matter, please call: | ; |
| Michele Heffelmire at (727) 547-9700 Name of Contact Person Area Code & Daytime Telephone Number | Ċ |
| Enclosed is a check for the following amount made payable to the Florida Department of State: | _ |
| S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional Copy is enclosed) | |
| Mailing Address Amendment Section Street Address Amendment Section | |

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

| (Name of Corporation as curren | tly filed with the Florida Dept. of State) |
|---|--|
| NA | |
| (Document Number | of Corporation (if known) |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation: | Florida Profit Corporation adopts the following amendment(|
| A. If amending name, enter the new name of the corporation: | |
| name must be distinguishable and contain the word "corporation," | The new |
| "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co", "chartered," "professional association," or the abbreviation "P.A. | A professional corporation name must contain the word |
| B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>) | |
| | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | |
| | |
| | ć |
| D. If amending the registered agent and/or registered office address registered agent and/or the new registered office address | |
| Name of New Registered Agent | |
| | |
| (Florida s | treet address) |
| New Registered Office Address: | , Florida |
| | (City) (Zip Code) |
| | |
| Now Designed Assetts Signature if showing Degistered Agen | •. |
| New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar | with and accept the obligations of the position. |
| | |
| | |
| Signature of New | Registered Agent, if changing |
| | |
| Check if applicable | |

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:

| X Change | PT Jo | hn Doc | |
|-------------------------------|---------------------|------------------|----------------------|
| X Remove | <u>V</u> <u>M</u> | ike Jones | |
| _X Add | <u>SV</u> <u>Sa</u> | olly Smith | |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) Change | \bot | Daniel T. Hunter | 14100 Honeywell Rd. |
| Add | | | Largo, Florida 33771 |
| Remove | | | |
| 2) Change | | | |
| Add | | | |
| Remove 3) Change | | | |
| Add | | | <u> </u> |
| Remove | | | |
| 4) Change | | | |
| Add | | | : *:. |
| Remove | | | (1) |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

RESOLUTION ADOPTED BY SOLE DIRECTOR

OF

AIRCO MECHANICAL CONTRACTORS, INC.

The undersigned, being the sole Director hereby adopts the following resolution:

| (1) | RESOLVED, that the following persons be, and they hereby are, elected to the designated |
|-----|---|
| | offices of the Corporation, to serve until their successors are elected and qualify: |

President:

Tim L. Heffelmire

Vice President:

Daniel Timothy Hunter

Secretary:

Michelle Heffelmire

Treasurer:

Michelle Heffelmire

(2) RESOLVED, that the acts taken and resolution adopted by the Incorporation director are, approved, ratified, and adopted.

Dated: 9 25 23

TIM L. HEFFELMIRE, DIRECTOR

| . If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific) | |
|---|---|
| NA | |
| NA | |
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| 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) | <u>.</u> |
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| The date of each amendment(s) adoption: $\underline{\gamma - \lambda 5 - \lambda 6 \lambda 5}$ | , if other than |
|--|----------------------|
| Effective date if applicable: 9-25-2023 | |
| (no more than 90 days after amendment file date) | · |
| Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date we document's effective date on the Department of State's records. | ill not be listed as |
| Adoption of Amendment(s) (CHECK ONE) | |
| The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action are action was not required. | nd shareholder |
| The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval. | |
| The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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) | |
| (voling group) | |
| Dated 10/19/23 | |
| Signature Muhelle Heppelmure | |
| (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) | |
| Michelle Heffelmire (Typed or printed name of person signing) | 1623. |
| Secretary/Treasurer | <u></u> |
| (Title of person signing) | |
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