

POA 0000001192

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

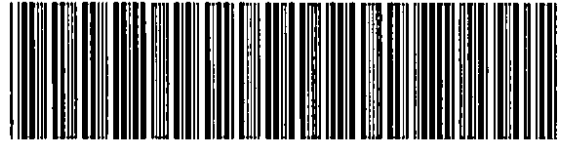
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000344506760

05/26/20--01024--003 **43.75

JUN 13 2020
S. YOUNG

FILED
2020 MAY 26 AM 6:38
CLERK OF SUPERIOR COURT
STATE OF MICHIGAN

COVER LETTER


TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: AIR-CON INTERNATIONAL, INC.

DOCUMENT NUMBER: P02000001192

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

 JAIME MALDONADO

Name of Contact Person

AIR-CON INTERNATIONAL, INC.

Firm/ Company

1802 SW 2ND STREET

Address

POMPANO BEACH, FLORIDA 33069

City/ State and Zip Code

JAIMEMO@AIRCONPR.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JAIME MALDONADO

Name of Contact Person

at (787) 406-1899

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

\$35 Filing Fee \$43.75 Filing Fee & \$43.75 Filing Fee & \$52.50 Filing Fee

Certificate of Status

Certified Copy
(Additional copy is
enclosed)

Certificate of Status
Certified Copy
(Additional Copy
is enclosed)

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
FL 32314

Street Address

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

**Articles of Amendment
to
Articles of Incorporation of**

AIR-CON INTERNATIONAL, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

P02000001192

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(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," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent

(Florida street address)

New Registered Office Address:

(City)

_____, Florida _____

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

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

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

FILED
2920 MAY 26 AM 6:38
TALLAHASSEE, FLORIDA
STATE DEPARTMENT OF REVENUE

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:

Change PT John Doe

Remove V Mike Jones

Add SV Sally Smith

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) Change	<u>VD</u>	<u>RAMIREZ, GILBERT</u>	B10 LAS GAVIOTAS
Add			TIERRA ALTA II,
Remove			GUAYNABO, PR. 00969
2) Change	<u>VD</u>	<u>MALDONADO DIEGO</u>	149 NW 70 TH STREET
Add			APT 212
Remove			BOCA RATON, FL 33487
3) Change	_____	_____	_____
Add			_____
Remove			
4) Change	_____	_____	_____
Add			_____
Remove			
5) Change	_____	_____	_____
Add			_____
Remove			
6) Change	_____	_____	_____
Add			_____
Remove			

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

Effective date if applicable: _____
(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 will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.

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.

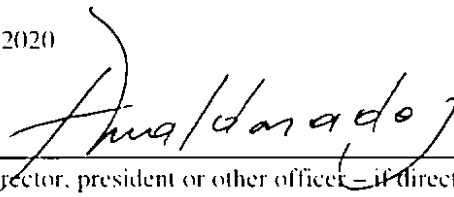
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"The number of votes cast for the amendment(s) was/were sufficient for approval

by _____
(voting group)"

Dated: MAY 21, 2020

Signature



(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)

JAIME MALDONADO
(Typed or printed name of person signing)

PRESIDENT
(Title of person signing)