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Division of Corporations

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

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From:

Account Name : S.LLANIO BUSINESS SERVICES INC

Account Number : I20200000011 Phone : (239)542-9104 Fax Number : (239)540-1760

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: s.llaniobusiness@gmail.com

COR AMND/RESTATE/CORRECT OR O/D RESIGN HJS REFRIGERATION, CORP.

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February 10, 2025

FLORIDA DEPARTMENT OF STATE Division of Corporations

HJS REFRIGERATION, CORP. 1422 NW 113 TERRACE MIAMI, FL 33167

SUBJECT: HJS REFRIGERATION, CORP.

REF: P03000116458

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

If you have any questions concerning the filing of your document, please call (850) 245-6000.

Neysa Culligan Regulatory Specialist III Letter Number: 325A00002805

FAX Aud. #: H25000047416

PILED 2025 FEB 17 AMII: 14

Articles of Amendment to Articles of Incorporation of

HIS REFRIGERATION, CORP.	
(Name of Corporation as currently	v filed with the Florida Dept. of State)
P03000116458	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this a its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
HIS CONTAINER CORP	The new
name must be distinguishable and contain the word "corporation," "c "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbi eviation "P.A."	company," or "incorporated" or the abbreviation "Carp.,"
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if appticable: (Molling address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address	ress in Florida, enter the name of the
Name of New Registered Agent	
(Florida str	eel address)
New Registered Office Address:	, Florida
	(City) (Lip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar Signature of New K	in with and accept the obligations of the position. 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, an
address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first latter 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, SY as an Add.

Example: X Change	<u>PT</u>	<u>John Doc</u>	
X Remove	<u>Y</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	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			

ttach additional sheets, if	lditional Artic f necessary).	(Be specific)					
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		***					<u>-</u>
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						* *	
							
							
							
in amendment provide	s for an exch	ange, reclassif	ication, or co	ncellation o	issued share	3 1	
rovisions for implemen (if not applicable, ind	ting the amer licate N/A)	Rintent it not	contained in	ше атпении	ent itsen.		
		-					
				···-			
							
				,			

	h amendment(s) adoption:, if other than the
date this docum	ent was signed.
Effective date <u>i</u>	f applicable:
	(no more than 90 days after amendment file date)
	te inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ctive date on the Department of State's records.
Adoption of Ar	nendment(s) (CHECK ONE)
The amendmaction was no	ent(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder of required.
	ent(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) holders was/were sufficient for approval.
☐ The amendm	ent(s) was/were approved by the shareholders through voting groups. The following statement arately provided for each voting group entitled to vote separately on the amendment(s):
"The n	umber of votes cast for the amendment(s) was/were sufficient for approval
bv _	,,
	(voting group)
	Dated02/17/2025
	Signature Danelsy Lizama
	(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)
	DANEISY LIZAMA
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)