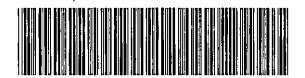
## P1760003595

(Re	equestor's Name)	
(Ad	ldress)	
(Äd	ldress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Name	e)
(Dc	ocument Number)	
Certified Copies		of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORA	ATION: COOL AIR WIND	OW UNIT REPAIR, INC	
DOCUMENT NUMB	ER:		
The enclosed Articles o	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
`	OENDI PEREZ		
_		Name of Contact Person	n
(	COOL AIR WINDOW UNIT	T REPAIR, INC.	
<u>-</u>		Firm/ Company	
2	2455 LENA LANE	типь сопфану	
<del>-</del>		Address	
•	WEST PALM BEACH, FL		
_		City/ State and Zip Cod	e
COOL	AIREPAIR@GMAIL.COM	1	
	<del></del>	sed for future annual report	notification)
	E Hall Godiens. (to be a		,
For further information	concerning this matter, pleas	se call:	
JENNYFER SALAS		561	324-7463
Name o	f Contact Person		de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	

Tallahassee, FL 32301

## **Articles of Amendment**

## Articles of Incorporation

(Name o	f Corporation as currently filed	with the Florida Dept. of State)		
P17000003	595			
	(Document Number of Corpo	oration (if known)		
ursuant to the provisions of section 607. Articles of Incorporation:	1006, Florida Statutes, this <i>Florida</i>	a Profit Corporation adopts the fo	ollowing amend	lment(s
If amending name, enter the new na	me of the corporation:			
			The n	
me must be distinguishable and con Corp.," "Inc.," or Co.," or the design ord "chartered," "professional associa	ation "Corp," "Inc," or "Co".	A professional corporation name	must contain	the
Enter new principal office address, rincipal office address MUST BE A S			ر م م	_
	<del></del>			- -
Enter new mailing address, if appli	cable:		25 25	77
(Mailing address MAY BE A POST	OFFICE BOX)		227	
			(1)	_
		<del>.</del>	<u>-</u> —	_
. If amending the registered agent ar new registered agent and/or the ne		Florida, enter the name of the		
Name of New Registered Agent	JENNYFER SALAS			
	2455 LENA LANE			
	(Florida street add			
New Registered Office Address:	WEST PALM BEACH	, Florida_	3415	_
	(City)		(Zip Code)	

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)

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	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	KENNETH AVENDANO	8529 NW 21ST CT,
Add			CORAL SPRINGS,
X Remove			FL 33071
2) Change	VP	JENNYFER SALAS	2455 LENA LANE
X Add			WEST PALM BEACH,
Remove			FL 33415
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	(Be specific)			
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	-	<del></del>		
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	6/20/2018	
The date of each amendment(	s) adoption:	, if other than th
date this document was signed.		
Effective date <u>if applicable</u> :	5/20/2018	
Effective date <u>if applicable.</u>	(no more than 90 days after amendment file da	te)
	is block does not meet the applicable statutory filing requirement because the does not meet the applicable statutory filing requirement.	ents, this date will not be listed as th
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the are sufficient for approval.	mendment(s)
	approved by the shareholders through voting groups. The follow for each voting group entitled to vote separately on the amendment	
"The number of votes	east for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and	l shareholder
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder action	reholder
6/20/2 Dated	018	
Signature	Jo	
(B <sub>2</sub> ) sel	a director, president or other officer – if directors or officers have ected, by an incorporator – if in the hands of a receiver, trustee, o pointed fiduciary by that fiduciary.	
	YOENDI PEREZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	