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TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations
NAME OF CORPORATION: Shaffer Air Conditioning And leftigeration Services, Inc.
DOCUMENT NUMBER: 58838
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Bubba Shaffer Name of Contact Person
Shaffer Air Conditioning And Refligeration Services. Inc.
12488 Kirby Smith Rd
Address
Or lando, FL 32832 City/ State and Zip Code
City/ State and Zip Code
Du bha @ Shafferair.com E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Bubba Shaffer at 407, 384-7902
Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) \$35 Filing Fee Certificate of Status S43.75 Filing Fee Certified Copy (Additional copy is enclosed) S43.75 Filing Fee Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment Section

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Articles of Amendment to Articles of Incorporation of

Shaffer Hir Conditioning And Refriger	
_ ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	y filed with the Florida Dept. of State)
S86338	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this atts Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
NA	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "word "chartered," "professional association," or the abbreviation "	n," "company," or "incorporated" or the abbreviation Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	_N/A
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA TECHNIS -3 P
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address. Name of New Registered Agent Bubba Share	
12488 Kirby S. (Florida stra	·····
New Registered Office Address: Orlando	, Florida 3383 2 (City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar we signature of New R	i. with and accept the obligations of the position. 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 Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	P	C.E Shaffer	12488 Kirby Smith R Drlando, FL 32832
Add Remove	ıΛ	0.00	
2) Change Add Remove	_ρ_	<u>Bubba Shaffer</u>	12488 Kirby Smith Ri Orlando, Fl 32832
3) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change			
Remove			

	cles, enter change(s) here: (Be specific)
NA	
	
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f an amendment provides for an exch provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
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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 amend	ment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing document's effective date on the Department of State's records.	g requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes ca by the shareholders was/were sufficient for approval.	ast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. must be separately provided for each voting group entitled to vote separately on the separately of the separat	
"The number of votes cast for the amendment(s) was/were sufficient for appr	roval
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholde action was not required.	r action and shareholder
The amendment(s) was/were adopted by the incorporators without shareholder act action was not required.	ion and shareholder
Dated	
Signature Signature	
(By a director, president or other officer – if directors or	
selected, by an incorporator – if in the hands of a receive appointed fiduciary by that fiduciary)	r, trustee, or other court
Bubba Skuffer	
Bubba Shuffer (Typed or printed name of person sign	ning)
President	
(Title of person signing)	