P19000066649

(Red	juestor's Name)	<u>.</u>	
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2022 HAR 28 AH 10: 15 SEVAL 11: 27: 3 TAILE

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of 4/11/2022

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR		ING SYSTEMS, INC.	
DOCUMENT NU	1/19000066649		,
The enclosed Artic	cles of Amendment and fee are su	bmitted for filing.	
Please return all co	orrespondence concerning this ma	tter to the following:	
	MARIA D GONZALEZ		
	PRESTIGE COOLING SYS	Name of Contact Person TEMS, INC.	1
		Firm/ Company	
	37922 Avoca Ave		
	ZEPHYRHILLS, FL 33541	Address	
	 	City/ State and Zip Code	e
	MG.PRESTIGEAIR@GMA.	,	
	E-mail address: (to be us	sed for future annual report	notification)
For further inform Maria Gonzalez	nation concerning this matter, pleas	se call: 813at (463-3402
Na	ime of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a chec	ck for the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fe	e S43.75 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	Amend Division The Control of the Co	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

Articles of Amendment to Articles of Incorporation

FHED

PRESTIGE COOLING SYSTEMS, INC. 2022 HAR 28 AM 10: 19 (Name of Corporation as currently filed with the Florida Dept. of State) SECALL P19000066649 (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: N/A"company," or "incorporated" or the abbreviation "Corp.," name must be distinguishable and contain the word "corporation, "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." N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: NA (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: N/A

Name of New Registered Agent				
	~	(Florida street address)		
New Registered Office Address:	N ^I A		, Florida	
		(Ciţv)		(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) (e). F.S.

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.

X Change	<u>PT</u> <u>John</u>	n Doc	
X Remove	<u>∨</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sall</u> y	y Smith	
Type of Action	<u>Title</u>	<u>Name</u>	Address
(Check One)	PD	CARLOS A GONZALEZ MARRERO	7144 BOYETTERD
1) Change			WESLEY CHAPEL, FL33545
Add X			
Remove X	P	SAUL GONZALEZ MARRERO	37922 AVOCA AVE
2) Change Add			ZEPHYRHILLS, FL 33541
Remove	СЕО Т	MARIA D GONZALEZ	37922 AVOCA AVE
3) X Change Add		***	ZEPHYRHILLS, FL 33541
Remove			
4) Change	D	OSMAN W. GUTTERREZ SUAZO	7144 BOYETTE RD
X Add			WESLEY CHAPTLIFL 33545
Remove			
5) Change		4	
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Article (Attach additional sheets, if necessary). Equal partnership on Officers/Directors	icles, enter change(s) here: (Be specific)
	
<u></u>	
F. If an amendment provides for an exchaprovisions for implementing the ame (if not applicable, indicate N/A) Equal partnership on Officers/Directors	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) a	loption:	, if other than the
date this document was signed. Mar	ch 24, 2022	
Effective date if applicable:		
	(no more than 90 days after amendment jile da	ite)
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirement of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without shar	cholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were st	opted by the shareholders. The number of votes east for the afficient for approval.	nmendment(s)
	proved by the shareholders through voting groups. The followeach voting group entitled to vote separately on the amenda	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	<u></u> ."	
	(voting group)	
MARCH 2	4, 2022	
Dated		
Signature	me ill.	
(By a d	rector, president or other officer – if directors or officers have designed, by an incorporator – if in the hands of a receiver, trustee, of the fiduciary by that fiduciary) MARIA D GONZALIEZ	
	(Typed or printed name of person signing) CHIEF EXECUTIVE OFFICER	<u></u>
	(Title of person signing)	