

FO600000 7682

(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



900428912689

Amend

FILED
2024 AUG -8 AM 9:45
OFFICE OF STATE
CLERK
TALLAHASSEE, FLORIDA

RECEIVED
2024 AUG -8 PM 3:40
TALLAHASSEE, FLORIDA

A. RAMSEY

AUG 9 2024



CSC - Tallahassee
1201 Hays Street
Tallahassee, FL 32301-2607
850-558-1500, Ext: x61563

To: Department Of State, Division Of Corporations
From: Shauna Godbolt
Ext: x61563
Date: 08/08/24
Order #: 1584644-2
Re: CoolSys Commercial & Industrial Solutions, Inc.
Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Amount to be deducted from our State Account: \$35.0 - FL State Account Number:
120000000195

Please take the following action:
File in your office on basis
Issue Proof of Filing

A handwritten signature in black ink, appearing to read 'Shauna Godbolt', is written over the text 'Please take the following action:'.

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

COVER LETTER

TO: Amendment Section Division of Corporations
CoolSys Commercial & Industrial Solutions, Inc.

SUBJECT: _____
Name of Corporation

DOCUMENT NUMBER: F06000007682

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ben Karki

Name of Contact Person

Coolsys

Firm/Company

145 S State College Blvd Suite 200

Address

Brea, CA 92821

City/State and Zip Code

tax@coolsys.com

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

For further information concerning this matter, please call:

BEN KARKI

657

286-8269

at (_____) _____

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$35 Filing Fee

☐ \$43.75 Filing Fee &
Certificate of Status

☐ \$43.75 Filing Fee &
Certified Copy

☐ \$52.50 Filing Fee,
Certificate of Status &
Certified Copy

Mailing Address:

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

Street Address:

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

PROFIT CORPORATION
APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR
AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA
(Pursuant to s. 607.1504, F.S.)

SECTION I
(1-3 MUST BE COMPLETED)

F06000007682

(Document number of corporation (if known))

CoolSys Commercial & Industrial Solutions, Inc.

1. _____
(Name of corporation as it appears on the records of the Department of State)

CALIFORNIA

12/13/2006

2. _____
(Incorporated under laws of)

3. _____
(Date authorized to do business in Florida)

SECTION II
(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? _____

5. _____
(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) _____

6. If the amendment changes the period of duration, indicate new period of duration.

(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

(New jurisdiction)

8. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

9. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change:

FILED
2024 AUG -8 AM 9:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
CEO/Secretary/Director	Richard Wyckoff	145 S STATE COLLEGE BLVD STE 200	<input checked="" type="checkbox"/> Add
		BREA, CA 92821	<input type="checkbox"/> Remove
President	Corrie Prunuske	145 S STATE COLLEGE BLVD STE 200	<input type="checkbox"/> Add
		BREA, CA 92821	<input checked="" type="checkbox"/> Remove
VP	BRYAN BEITLER	145 S STATE COLLEGE BLVD STE 200	<input checked="" type="checkbox"/> Add
		BREA, CA 92821	<input type="checkbox"/> Remove
CFO/Treasurer	ALAN JOHANSEN	145 S STATE COLLEGE BLVD STE 200	<input checked="" type="checkbox"/> Add
		BREA, CA 92821	<input type="checkbox"/> Remove
Secretary	Burton Hong	145 S STATE COLLEGE BLVD STE 200	<input type="checkbox"/> Add
		BREA, CA 92821	<input checked="" type="checkbox"/> Remove

10. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.

Signed by:

Alan Johansen

575078212700491

(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

Alan Johansen

CFO

(Typed or printed name of person signing)

(Title of person signing)

FILING FEE \$35.00

AMEND-15848