2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F08000002253

Entity Name: CLIMACOOL CORP.

FILED Oct 09, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
	I PENNSYLVA 1A CITY, OK 7					
Current Mailing Address:				New Mailing Address:		
	I PENNSYLVA 1A CITY, OK 7					
FEI Number:	73-1409358	FEI Number Applied For ()	FEI Num	ber Not Appli	cable () Certificate of Status Desired ()	
Name and	Address of C	Surrent Registered Agent:		Name and	Address of New Registered Agent:	
CAPITOL CORPORATE SERVICES, INC. 155 OFFICE PLAZA DRIVE SUITE A TALLAHASSEE, FL 32301 US						
	named entity see of Florida.	submits this statement for the p	urpose of	changing its	s registered office or registered agent, or both,	
SIGNATUR	RE: DELANIE	CASE, ASSISTANT SECRETA	ARY			
	Electron	ic Signature of Registered Age	ent		Date	
		3(2)(b), F.S., the corporation did not	t receive th	ne prior notice	э.	
Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	GOLSEN, JACK	INSYLVANIA AVENUE		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DCEO () GOLSEN, STEV 7300 SW 44TH OKLAHOMA CI	STREET		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	GOLSEN, BARI	INSYLVANIA AVENUE		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	GOSS, DAVID I	INSYLVANIA AVENUE		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SHELBY, TONY	INSYLVANIA AVENUE		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	CARVER, JOHN	INSYLVANIA AVENUE		Title: Name: Address: City-St-Zip:	V (X) Change () Addition CARVER, KRISTY 16 SOUTH PENNSYLVANIA AVENUE OKLAHOMA CITY, OK 73107	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KRISTY CARVER V 10/09/2009