JOHN

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
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DEPARTMENT OF STATE

AMAR 29 2017 R. WHITE 17 HAR 29 AM 10: 56

COVER LETTER

TO: Amendment Section

Division of Corporations	·
NAME OF CORPORATION:	PACKAGED PEFRIGERATION S
DOCUMENT NUMBER:	61014
The enclosed Articles of Amendment and fi	
Please return all correspondence concerning	
r rease return air correspondence concerning	and makes to the following.
KE	NNETH Brain
	Name of Contact Person
	Firm/ Company 325 PENNSYLVANIA AUE, SE Address LARGINGTON, D.C. 2000 3 City/ State and Zip Code
	Firm/ Company
	325 PENNSYLVANIA KUE, SE
	Address
	WAGHINGTON , U.C. 2000 3
	City/ State and Zip Code
K	(to be used for future annual report notification)
E-mail address:	(to be used for future annual report notification)
For further information concerning this mat	ter, please call:
KENNETH BROW	at (202) 437 7435 Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount	nt made payable to the Florida Department of State:
□ \$35 Filing Fee □\$43.75 Filing Certificate of	
Mailing Address	Street Address
Amendment Section	Amendment Section Division of Corporations
Division of Corporations P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

17 MAR 29 AM 10: 56

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Name of Corporation as currently filed with the Florida Dept. of State) J61014
(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: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "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." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (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: Name of New Registered Agent (Florida street address) New Registered Office Address: 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

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	PT John D	<u>oe</u>			
X Remove	<u>V</u> <u>Mike J</u>	ones			
X Add	SV Sally S	mith			
Type of Action (Check One)	<u>Title</u>	Name	<u>Ad</u>	dress	
1) Change	<u>V</u>	MICHAEL	HUBHES_		
Add					
X Remove					
2) Change	VC	ELDEN C	HARLES_		
Add					
Remove 3) Change	PC	ENNEY	H BLOUN	325 PENLSY	L VANIA TUE
Add Remove	l	CHAIRM A PRESIA	fw AND _	325 PENLSY WASKINGTON, D.C 20003	SE
4) Change					
Add					
Remove					
5) Change				 	
Add					
Remove					
6) Change	<u>.</u>		 		
Add					
Remove					

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
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f an amendment provides for an exch	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	indicate if not contained in the amendment itsen.
	·

The date of each amendment(s) adoption:	119	3/29/20	017 , if other than th
date this document was signed.		• •	
Effective date if applicable: (no more than 96	DDAY 0 days after amer	ndment file date)	
Note: If the date inserted in this block does not meet the applic document's effective date on the Department of State's records.	able statutory fil	ing requirements, th	nis date will not be listed as th
Adoption of Amendment(s) (CHECK ONE)			
The amendment(s) was/were adopted by the shareholders. The by the shareholders was/were sufficient for approval.	number of votes	cast for the amendn	nent(s)
☐ The amendment(s) was/were approved by the shareholders thro must be separately provided for each voting group entitled to v			
"The number of votes cast for the amendment(s) was/were	e sufficient for ap	pproval	
by			
(voting group)			
The amendment(s) was/were adopted by the board of directors action was not required.	without sharehold	der action and share	holder
The amendment(s) was/were adopted by the incorporators with action was not required. 3/21/20		ction and sharehold	er
Signature (By a director, president or other offic selected, by an incorporator – if in the appointed fiduciary by that fiduciary)			
(Typed or printed n	TH E	ROWN	
CH AIRM AT	·	Pe 6<106	5 NIT

(Title of person signing)