2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 19, 2009
Secretary of State

DOCUMENT# L01000014362

Entity Name: COOLING INTERNATIONAL, LLC

Current Principal Place of Business:

3138 WEST, 81 ST.
HIALEAH, FL 33018

New Principal Place of Business:

4555 C ATWATER CT
C
BUFORD, GA 30518

Current Mailing Address:

4555 ATWATER CT
C
BUFORD, GA 30518

New Mailing Address:

4555 C ATWATER CT
C
BUFORD, GA 30518

FEI Number: 65-1132737 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ESCUELA, FERNANDO J
1290 WESTON RD SUIT 306
WESTON, FL 33326 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: MARLENE, ESCUELA
Address: 2542 FLORAL VALLEY DR
City-St-Zip: DACULA, GA 30019

Title: MGR ( ) Delete
Name: ESCUELA, FERNANDO J
Address: 2542 FLORAL VALLEY DR
City-St-Zip: DACULA, GA 30019

Title: MGR ( ) Delete
Name: ESCUELA, SEBASTIAN
Address: 2542 FLORAL VALLEY DR
City-St-Zip: DACULA, GA 30019

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: FERNANDO ESCUELA DIRE 03/19/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date