L07000121740

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J. SAULSBERRY EXAMINER

NOV 0 4 2011

COVER LETTER

TO:	Registration Division of C						
SUBJE	CT: (Cool	Import	s, LLC			
				ited Liability Company			
The enc	losed Articles	of Amendmen	t and fee(s) are sul	bmitted for filing.			
Please r	eturn all corres	pondence con	cerning this matter	r to the following:			
		Du	vight C	Name of Person			
		_Co	ol Im	ports, LLC Firm/Company			
		12	7 W. F	air banks Ave. #	513		
		Wi	nter Par	City/State and Zip Code Yr, COM to be used for future annual report notifica	1326	201 TAL	
		dri	coole cfl. E-mail address: (YY, COM to be used for future annual report notifica	tion)	2011 NOV -3 SECRETARY	<u> </u>
For furti	her information		nis matter, please o			RY OF	m
Dw	right Ca	of Person		at (407) 404-82 Area Code & Daytime T	29 elephone Number	NOV -3 AM 8: 43 CRETARY OF STATE LAHASSEE, FLORIDA	Ku, ii
Enclose	d is a check for	the following	gamount:				
\$2 5,	00 Filing Fee		Filing Fee & ificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &	d)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

COOL IMPORTS, LLC

(Name of the Limited Liability C (A Florida Lin	Company as it now appears on our mited Liability Company)	r records.)	
The Articles of Organization for this Limited Liability Conficial document number <u>L07000121740</u>		r 6, 2007 and a	ssigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limite	d liability company here:		
The new name must be distinguishable and end with the words 'L.L.C."	"Limited Liability Company," the	designation "LLC" or the	abbreviation
Enter new principal offices address, if applicable:			
Principal office address MUST BE A STREET ADDRE	<u>'SS)</u>	,	
		SEC	
Enter new mailing address, if applicable:		<u> </u>	<u> </u>
Mailing address MAY BE A POST OFFICE BOX)		ASSEE. F	A I
B. If amending the registered agent and/or register registered agent and/or the new registered office addresses.	red office address on our reco ss here:	ords, enter the name	Bf the new
Name of New Registered Agent:			<u> </u>
New Registered Office Address:	Enter Flor	ida street address	
		, Florida	
-,	City	Zip Cod	de
New Registered Agent's Signature if changing Registered A	Agent:		

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member **Title** Name **Address Type of Action** MGRM MGRM ☐ Add ☐ Remove □Add \square Add Remove □ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated November Signature of a member or authorized representative of a member Typed or printed name of signee

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Filing Fee: \$25.00