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(Danisahada Massa)						
(Requestor's Name)						
(Address)						
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,						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Dasiness Link) Name)						
(Document Number)						
Certified Copies Certificates of Status						
<u></u>						
Special Instructions to Filing Officer:						
A. LUNT						
A. LUNI						
SEP 2 0 2012						
EXAMINER						
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was to fig. . .

Office Use Only

COVER LETTER

TO:	Registration Se Division of Con				
SUBJI	ECT:	COOL II	MPORTS, LLC		
			ted Liability Company		-
		Amendment and fee(s) are sub ondence concerning this matter			
			Dwight I. Cool		_
			Name of Person		
			Cool Imports, LLC		
			Firm/Company		<u> </u>
		127	W. Fairbanks Ave. #51	3	2812 SEP 24 PALLAHASS
			Address		
		Wint	ter Park, FL 32789-432	26	La
			City/State and Zip Code		PH W 46
		E-mail address: (dricool@cfl.rr.com E-mail address: (to be used for future annual report notification)		
For fu	ther information of	concerning this matter, please of	all:		b.
	D ₁	wight I. Cool	at (407)	404-8229	
		of Person	Area Code & D	Daytime Telephone Num	ber
Enclos	ed is a check for t	he following amount:			
\$25	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is end	Certificolosed) Certific	Filing Fee, icate of Status & ied Copy ional copy is enclosed)
	MAIL	ING ADDRESS:	STREET/CO	OURIER ADDRESS	:

Registration Section
Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

COOL IM	<u>PORTS, LLC</u>			
(Name of the Limited Liability Com (A Florida Limite	i pany as it now apr d Liability Compan	oears on our records.) y)		
The Articles of Organization for this Limited Liability Compared Florida document numberL07000121740	any were filed on _	December 6, 2007	_ and assigr	ned
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited l	iability company	here:		
The new name must be distinguishable and end with the words "L" "L.L.C."	imited Liability Cor	npany," the designation "LLC	" or the abb	reviation
Enter new principal offices address, if applicable:		P.	24	
(Principal office address MUST BE A STREET ADDRESS	<u> </u>	A R	2 9 = -	***
		\$65.	2	
Enter new mailing address, if applicable:		בר פור איני בר פור איניים	PX	
(Mailing address MAY BE A POST OFFICE BOX)		AND		- Nav. *
B. If amending the registered agent and/or registered registered agent and/or the new registered office address leading to the new registered office address leading to the new registered Agent:		n our records, enter the	name of	the nev
New Registered Office Address:	· · · · · · · · · · · · · · · · · · ·			
		Enter Florida street addres	S	
	City	, Florida		
	47	•	·L	

New Registered Agent's Signature, if changing Registered 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 <u>Title</u> <u>Name</u> **Address Type of Action MGRM** Dwight I. Cool 127 W. Fairbanks Ave. #513 ☐ Add Remove Winter Park, FL 32789-4326 ☐ Add ☐ Remove ☐ Add Remove Add Remove 4Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) September 21 Dated Signature of a member of authorized representative of a member Dwight I. Cool, Member

Page 2 of 2

Typed or printed name of signee

Filing Fee: \$25.00