## L09000115825

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T. CLINE

JUL 25 2012

**EXAMINER** 

## **COVER LETTER**

TO:

**Registration Section** 

Division of Co	rporations							
SUBJECT:	COOL A	ND DRE, LLC.						
		ited Liability Company						
	Amendment and fee(s) are sub	_						
rease return an correspo	ondence concerning this matter	to the following.						
		Marcello Valenzano						
	Name of Person							
	COOL AND DRE, LLC							
	Firm/Company							
	14359 Miramar Parkway Suite 340							
		Address						
	<b>N</b>	liramar, Florida 33027						
		City/State and Zip Code						
	E-mail address: (	ool@coolanddre.com to be used for future annual report notifice	ation)					
For further information	concerning this matter, please	call:						
Marc	cello Valenzano	054	49-3152					
Name of Person		at (954) 4 Area Code & Daytime						
Enclosed is a check for	the following amount:		2					
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee					
Regist Divisi P.O. E	LING ADDRESS: tration Section on of Corporations Box 6327 tassee, FL 32314	STREET/COURIE Registration Section Division of Corpora Clifton Building 2661 Executive Cen Tallahassee, FL 323	tions ter Circle					

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	<b>COOL AND</b>	DRE, LLC						
(Name of the Limited	l Liability Compa A Florida Limited I	iny as it now appea Liability Company)	rs on our records.)					
The Articles of Organization for this Limited L Florida document number L0900011:								
Florida document numberL0900011								
This amendment is submitted to amend the following	owing:							
A. If amending name, enter the new name of	f the limited liab	oility company her	<u>re</u> :					
	N/A	4						
The new name must be distinguishable and end wi "L.L.C."	th the words "Lim	ited Liability Comp	any," the designation "L	LC" or the	abbreviation			
Enter new principal offices address, if applied	cable:	N/A						
(Principal office address MUST BE A STREI	ET ADDRESS)							
				IS IS	<b>26</b>			
				CAE:	· · ·			
Enter new mailing address, if applicable:		N/A	······································	- <del>5 5 5</del>	<u></u>			
(Mailing address MAY BE A POST OFFICE	BOX)			— ma Ma	· · ·			
				<del></del>	_ <u></u>			
				27	¥.			
B. If amending the registered agent and registered agent and/or the new registered of	or registered of ffice address her	ffice address on <u>re</u> :	our records, <u>enter t</u>	he name	of the new			
Name of New Registered Agent:	Marcello Va	alenzano						
	4.050.48"							
New Registered Office Address: 14359 Miramar Parkway Suite 340  Enter Florida street address					<del></del>			
		Miramar	. Florida	330	33027			
		City	, rioi ida	Zip Co				
N D	D!-44 44	_						

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. If hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

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

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>		Address	Type of Action
MGRM	Renida Tai-V	alenzano	14359 Miramar Parkway Suite 340 Miramar Elorida 33027	Add Remove
	<u> </u>			Add Remove
		<u>.</u>		Add Remove
				Add Remove
****				Add Remove
<del>4   2</del> t	_			Add Remove
D. Ifan	nending any other infor N/A	mation, enter chang	ge(s) here: (Attach additional sheets, if necessary.)	
	IVA			SECRETARY OF
Dated	July 19	20	012	E SALE
		_ \ \ \ .	r or authorized representative of a member	
			arcello Valenzano I or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00