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(Requestor's Name)	
(Address)	8003424
(Address)	
(City/State/Zip/Phone #)	
(Business Entity Name)	
(Document Number)	08/37/200
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See Namartanno	

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R. WHITE APR 0 8 2020

To whom it may concern,

I, Yuri Wright is writing this affidavit to release the name Rapid Cool LLC to use for another entity. I have also attached an Article Of dissolution as proof.

COVER LETTER

Registration Section

Tallahassee, FL 32314

TO:

Division of Corporations	
SUBJECT:	Services LLC
Name of	Limited Liability Company
The enclosed Articles of Amendment and fee(s) are	submitted for filing.
Please return all correspondence concerning this ma	atter to the following:
Yuri	
	Name of Person
Brite Rite	Services LLC Firm/Company
3155 W	Sunise Suite # 133
	Address
Plantation	Florida 33312 City/State and Zip Code
Τ. 2.	City/State and Zip Code
COX DOX 3 John State of the Control	ess: (to be used for future annual report notification)
For further information concerning this matter, plea	ise call:
YURI WRIGHT	$\frac{1}{2}$ at $\frac{754}{60-4331}$
Name of Person	Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
\$\$\$\$5.00 Filing Fee & Certificate of Statu	
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION . OF

23:55

BRITE RITE SERVICES LLC 27 MIII:49
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)
The Articles of Organization for this Limited Liability Company were filed on 6/23/2010 and assigned Florida document number 42000066909
This amendment is submitted to amend the following:
This amendment is subtracted to afferin the following.
A. If amending name, enter the new name of the limited liability company here:
RAPID COOL LLC
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)
Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)
 -
B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:
Name of New Registered Agent:
Num Designation of Office Address
New Registered Office Address: Enter Florida street address
l'Invida
, Florida
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 605, 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 Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
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			□Remove
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<u> Sote:</u> If t	he date inserted in t	his block does no	t meet the applic	able statutory fili		date will not be listed as
ocument	's effective date on	the Department o	i State's records.			
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Dated	March	22	<u> 2020</u>	·		
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Filing Fee: \$25.00