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S. WARREN MAR 2 1 2018

COVER LETTER

	tegistration Se Division of Cor			
CUD IECT	TOTALLY	COOL, L.L.C.		
SUBJECT	ı:	Name of Lin	nited Liability Company	
The enclos	sed Articles of	Amendment and fee(s) are sub	omitted for filing	
		endence concerning this matter	_	
		Paul A. Moran		
		*	Name of Person	
		Paul A. Moran. P.A.		
			Firm/Company	
		46 N. Washington Blvd., Suite 25		
			Address	
		Sarasota, FL 34236		
			City/State and Zip Code	•
		Darci@pamoranesq.com		• •
For further	r information c	E-mail address: (oncerning this matter, please c	to be used for future annual report no	tification)
Paul A. M	oran	· ·	941 955-1717 at ()	
	Name o	f Person	Area Code Dayti	me Telephone Number
		:		
Enclosed i	s a check for th	ne following amount:		
\$25.00) Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Registr Divisio P.O. Bo	ation Section of Corporations ox 6327 ussee. FL 32314	STREET/COUR Registration Sect Division of Corp Clifton Building 2661 Executive C Tallahassee, FL	orations Center Circle

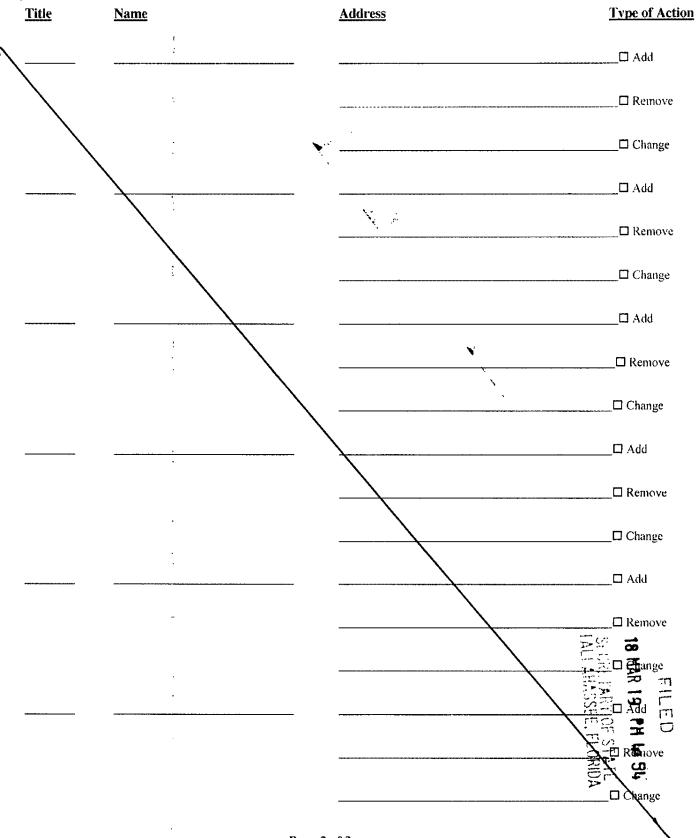
ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Totally Cool, E.L.C.
(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 November 29, 2017 and assigned Florida document number 1,17000244991
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here:
Fotally Cool, LLC
he 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)
3. 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:
New Registered Office Address:
Enter Florida street address
, Florida, Zip Code
New Registered Agent's Signature, if changing Registered Agent:
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 Jamilian 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



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Water Control		
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ted March 12 3/13 Signature:	This	APRIL C

Filing Fee: \$25.00

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