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COVER LETTER

Registration Section): **Division of Corporations**

Cool X LLC Name of Limited Liability Company JBJECT: _

he enclosed Articles of Amendment and fee(s) are submitted for filing.

ease return all correspondence concerning this matter to the following:

| Olga BORISOVA | | |
|---|--|--|
| Nime of Person | | |
| COOLX LLC | | |
| Firm/Company | | |
| 51 SW 11 St # 1022 | | |
| Address | | |
| MIANI, FL 33130 | | |
| City/State and Zip Code | | |
| OLYAHIAHI C, PHOR. COM | | |
| E-mail address: (to be used for thure annual report notification) | | |

or further information concerning this matter, please call:

ULYR BOR/SOLA at (850) 252 3595 Area Code Daytime Telephone Number

nclosed is a check for the following amount:

\$1 \$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)

Mailing Address: **Registration Section Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

| ARTICLES OF A | | | | |
|---|--|--|--|--|
| TO | | | | |
| ARTICLES OF ORGANIZATION | | | | |
| OF | | | | |
| COOLX LL | | | | |
| (<u>Name of the Limited Liability Compar</u> (A Florida Limited L | | | | |
| he Articles of Organization for this Limited Liability Company | were filed on August 20, 20,222 and ensigned | | | |
| orida document number <u>120000 258 370</u> . | | | | |
| his amendment is submitted to amend the following: | | | | |
| . If amending name, <u>enter the new name of the limited liabi</u> | lity company here: | | | |
| he new name must be distinguishable and contain the words "Limited Liabili | ty Company," the designation "LLC" or the abbreviation "L.L.C." | | | |
| nter new principal offices address, if applicable: | | | | |
| Principal office address MUST BE A STREET ADDRESS) | | | | |
| | | | | |
| | | | | |
| nter new mailing address, if applicable: | | | | |
| Mailing address MAY BE A POST OFFICE BOX) | | | | |
| | | | | |
| | | | | |
| If amending the registered agent and/or registered office a gent and/or the new registered office address here: | ddress on our records, <u>enter the name of the new registered</u> | | | |
| | | | | |
| Name of New Registered Agent: | | | | |
| New Registered Office Address: | Enter Florida street address | | | |
| | EMET FIOTAA MEVEL AAAFESS | | | |
| | Florida Cuy Zip Code | | | |
| | Cuy Zip Code | | | |
| ew 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 rovisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and ccept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is eing filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability ompany has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

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

| GR = Manager MBR = Authorized Member | | | | |
|---|-------------|---------|----------------|--|
| <u>tle</u> | <u>Name</u> | Address | Type of Action | |
| | | | 🖸 Add | |
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If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Adding middle naties to original naties of members: Olga Borisour and Alena Kozhevnikova. Please add middle nakes as Sollowing: Member 1: Olga Anatolyevna Borisova Member 2: Aléna Andreevna Kozhevnikova (Firstname) (Middle nake) (Last name) Thank you! P.S. We mailed you first copy of amendrant yesterday, but darpot to include chiele, this is second copy with the chiele included. Please update Records. That you! (optional) Effective date, if other than the date of filing: _

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the cord is filed.

Dated Sept 13, 2000 20:10 Signature of M authorized representative of a member Olga BORISOVA I vped or printed name of signed