120000319652

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone #)
PICK-UP	WAIT	MAIL
(Bu	usiness Entity Name)	
(Dc	ocument Number)	
Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	

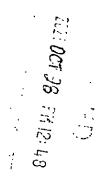
Office Use Only

A. RIVERS NOV 0 3 2021



100375046501

10/28/21--01016--011 **60.00



COVER LETTER

TO:	Registration Sec Division of Corp			è	* * * * * * * * * * * * * * * * * * *	
SUBJI	FCT: PCO	Cool Services	LLC	•	•	
.1003	<u></u>	Name of Limi	ited Liability Compar	ıy		
The en	iclosed Articles of A	mendment and fee(s) are subt	mitted for filing.			
Please	return all correspon	dence concerning this matter t	to the following:			
		Jose	e Pujol			
			Name of Perso	n		
			Firm/Compan	y		
		<u> 913 Y</u>	hirk Caldy Address	WOY		
		Valrico	FL 33 City/State and Zip	<u>5619</u>		
		JL Construct	tion - ac Co		cation)	
For fu	rther information co	ncerning this matter, please ca				
	Jos Name of	e Posol	at (<u>813</u> Area Cod	e) 270 – C	1998 Telephone Number	
Enclos	sed is a check for the	following amount:				
□ \$2	25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Certified Co (additional cop	ру	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed	
	Mailing Address:			reet Address:	i.u.	
	Registration So			gistration Sect		

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Pro Cool	Services	; LLC			
(Name of the Limited (A	Liability Company Florida Limited Lia	as it now appears on or bility Company)	ur records.)		
The Articles of Organization for this Limited Liab Florida document number L2000319652		rere filed on	0205/20	and assi	gned
This amendment is submitted to amend the follow	ing:				
A. If amending name, enter the new name of the	ne limited liabili	ty company here:			
The new name must be distinguishable and contain the word	2/A &	LLC	ion W.L.C.	-El-minitor of 1	<u></u>
Enter new principal offices address, if applicab	le:	6629. Tampa, T	32nd A FL, 33	ve S. 619	
Enter new mailing address, if applicable:			<u> </u>		<u>.</u>
(Mailing address MAY BE A POST OFFICE BO	<u> </u>			F-3	
B. If amending the registered agent and/or reg	istered office ad	dress on our record	s, <u>enter the na</u>	me of the new	registered
agent and/or the new registered office address l	here:				• •
Name of New Registered Agent:	Jose	2 Ripl		112:4	·
New Registered Office Address:	<u>6620</u>	Enter Florida stre	eet address	5 # 8	
	To	mpa	, Florida	33619 Zip Code	

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>	Name	Address	Type of Action
MGR	Jose Rijal	6629 32nd Ave S	□Add
	-	6629 32nd Ave S. Tampa, FL, 33619	□Remove
			□Change
			🗆 Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□ Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
		 	Change
			□Add
			□Remove

Page 2 of 3

D. II amen	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)

4	
-	
	
	
_	
(If an effect <u>Note:</u> If	e date, if other than the date of filing:
	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 0th day after the record is filed.
Dated	October 26 2021
	October 26 2021 Signature of a member or authorized representative of a member
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00