## 121000472659

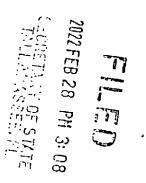
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to I	Filing Officer:	
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Office Use Only



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Y. SCOTT MAR - 5 2022

## **COVER LETTER**

TO: Registration Section

Division of Corporations		•
Cinhon o	110	•
SUBJECT: Winter Na	ane of Limited Liability Company	
	······································	
The enclosed Articles of Amendment and feets	s) are submitted for filing.	
Please return all correspondence concerning th	nis matter to the following:	
Wile	Name of Person	<del></del>
_ Cooln	nen LLC	2022 FI SECRE TALL
1121 1	15th Aue Sout	FEB 28 I
Lake	WOM FL 3	3460 FR 3:08
<u>Coolmer</u> E-mail	address: (to be used for future annual report no	
For further information concerning this matter.	, please call:	
Wilnut Michel Name of Person	at ( <u>754</u> ) <u>366</u> Area Code Dayti	-1788 me Telephone Number
Enclosed is a check for the following amount:		
\$25.00 Filing Fee		☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address: Registration Section	Street Address: Registration S	ection
Division of Corporations	Division of Co	orporations
P.O. Box 6327 Tallahassee, FL 32314	The Centre of 2415 N. Monr	Tallahassee oe Street, Suite 810
a series resource with the street to the	21.57.11011	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

Coolmen LLC	
(A Florida Limited)	iny as it now appears on our records.) Hability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L21000472659</u> .	were filed on $\frac{11}{12021}$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
Codmen 110	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1121 15th Are South
(Principal office address MUST BE A STREET ADDRESS)	Lake Worth, FL 33460
Enter new mailing address, if applicable:	1121 15th Ave Sauts 5
(Mailing address MAY BE A POST OFFICE BOX)	Lake Worth FLE 33460
B. If amending the registered agent and/or registered office a	address on our records, enter the name of the new registered
agent and/or the new registered office address here:	address on our records, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
<del></del>	City Zip Code
New Registered Agent's Signature, if changing Registered Agent:	

Thereby 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. Thereby 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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Tective date, if other than the date of filing:  In effective date is listed, the date must be specific and cannot be prior to date of fi	lieu or man than (M) d	(optional)	D.,	
ite: If the date inserted in this block does not meet the applicable statut cument's effective date on the Department of State's records.	ory filing requireme	nts, this date v	vill not	be listed
rainent's effective date on the Department of State S records.				
ecord specifies a delayed effective date, but not an effective time, at 12: is filed.	01 a.m. on the earlie	erof; (b) The	90th da	ny after th
ned 02/21/2022				
(1/142)				