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Registration Section

TO:

Division of Corporations			
SUBJECT: COO	Brezze Floo	oring LLC.	
-	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Ethan E	Eubanks	
		Name of Person	·
		Firm/Company	
	9705 Carr	Rd.	
		Address	
	Rivenieur	FL 33569 City/State and Zip Code MKS 30@ gmail. (to be used for future annual report not	
		City/State and Zip Code	
	Ethaneuba	inks 30@gmail.	om
	E-mail address:	(to be used for future annual report not	ification)
For further information c	oncerning this matter, please of	all:	
		at (
Name o	f Person	at ()	nc Telephone Number
Enclosed is a check for the	ne following amount:		
S25.00 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 Addres		Street Address:	
Registration S		Registration Se	
Division of C P.O. Box 632		Division of Co The Centre of	-
Tallahassee, l			pe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Cool Breeze floor			
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on our reco liability Company)	<u>)rds.</u>)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L22000262280</u> .	were filed on(e/8/2	.2	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liable	llity company here:		
Cool Breeze Aluminum	\ LLC		
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "L	LC" or the abbrevi	ation "L.L.C."
Enter new principal offices address, if applicable:	9705 Carr	ld.	
(Principal office address MUST BE A STREET ADDRESS)	9705 Carr Liunium F	20 00	2023 F
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		DAY OF S	EB 27 AM
		<u></u>	9
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent:	nddress on our records, <u>ent</u>	er the name of	the new registered
New Registered Office Address:	Enter Florida street add	ress	
		Florida	
	City	Z	ip 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>	<u>Name</u>	Address	Type of Action
		·	□Add
			□Remove
			Change
			🗆 Add
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an eff iote:	ive date, if other than the date of filing:
recor l is fi	d 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 led.
ated	February 22, 2023. Chaw Clarks Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member
	Ethan Eubanks
	Typed or printed name of signee