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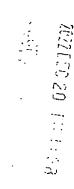
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COVER LETTER

	gistration Sec vision of Corp					•
cuo ieze		nufacturing LLC				
SUBJECT	SUBJECT:Name of Limited Liability Company					
		Amendment and fee(s) are sub	_			
		Stephanic Goebel				
			Name of Person			
		ZenBusiness Inc.				
			Firm/Company			7
5511 Parkcrest Drive, Ste. 103					-: . :	2011/00
			Address		-,-	- (H) - 03
		Austin, TX 78731				30 F
			City/State and Zip Code	,		: :
		fulfillment@zenbusiness.ec	om to be used for future annual report notif	Tankina i		: ශූශ
For further	information co	ncerning this matter, please of		сации	٠.	٠,٠
	Goebel c/o Zen	-	8.1.1 .193-62.19			
	Name of	Person	at ()	Telephone Number		
Enclosed is	a check for the	e 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 Filit Certificate Certified C tadditional co	of Stat Copy	tus &

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

KoolAir Manufacturing LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited l	ny as <mark>it now appears on our records.</mark>) Liability Company)	
he Articles of Organization for this Limited Liability Company lorida document number 1.22000423917	were filed on 2022-09-30	and assigned
nis amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liab	ility company here:	
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the a	bbreviation "L.L.C."
nter new principal offices address, if applicable:	340 Southeast 3rd Street, Unit 1010	
Principal office address MUST BE A STREET ADDRESS)	Miami, Fl. 33131	99
		· 7 .
nter new mailing address, if applicable:	340 Southeast 3rd Street, Unit 1010	20
Mailing address MAY BE A POST OFFICE BOX)	Miami, FL 33131	
		- <u>မ</u> - မ
. If amending the registered agent and/or registered of egistered agent and/or the new registered office address here. Name of New Registered Agent:		the name of the
New Registered Office Address:	Enter Florida street address	
	Florida	
	Ciţv	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>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	Logan OConnell	340 Southeast 3rd Street	
		Unit 1010	
			☐ Remove
		Miami, FL 33131	Change
			Add
			Remove
			Change
			D Add
			□ Remove
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ctive date, if other than the d	ate of filing:	date of filing or more tha	(optional)	ත
e: If the date inserted in this bloc iment's effective date on the Dep	k does not meet the applical	ole statutory filing requ	irements, this date wi	ll not be list
ecord specifies a delayed one 90th day after the recor	effective date, but not d is filed.	an effective time,	at 12:01 a.m. or	the earli
December 6	2022			
/s/ Logan OConnell				
	gnature of a member or author	zed representative of a m	ember	

Page 3 of 3

Filing Fee: \$25.00