(Requestor's Name) (Address)			
(Address)	200329208842		
(City/State/Zip/Phone #)	200323205842 05/15/15-01044-56 ++25.0		
(Business Entity Name)			
(Document Number)	2019 JUL 22		
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Office Use Only			

CSC - WILMINGTON 251 Little Falls Drive Wilmington De 19808

800-927-9800 302-636-5454 FAX

TO: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Anthony Arthur anthony.arthur@cscglobal.com

Date: July 18, 2019

Order#: 606124-004

Re: COOLING TOWER TECHNOLOGIES, L.L.C.

Enclosed please find:

XX ____ Change of Registered Agent and Office. _____ Check in the amount of \$_____.

Please take the following action:

XXFile in your office on a routine basis.XXIssue Proof of Filing.

XX Please return evidence to the following:

Attn: Anthony Arthur c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

XX ____ Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 23, 2019

- 5 I.

COOLING TOWER TECHNOLOGIES, L.L.C. PO BOX 120 WHITE CASTLE, LA 70788

SUBJECT: COOLING TOWER TECHNOLOGIES, L.L.C. Ref. Number: M16000009295

We have received your document for COOLING TOWER TECHNOLOGIES, L.L.C. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Document number listed on application is incorrect please provide correct document number.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tacarri K Glass Regulatory Specialist II

Letter Number: 319A00010511

JUL 2 2 2010

www.sunbiz.org

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: COOLING TOWER TECHNOLOGIES, L.L.C.

(a) <u>5</u>	2410 CLARK RD	_ (b)_	PO Box 120	
	Principal office address of limited liability company: (<u>Note: MUST BE STREET ADDRESS</u>)		Mailing address of limited liab (<u>Note: MAY BE POST OF</u>	
	WHITE CASTLE, LA 70768		WHITE CASTLE, LA 70788	
	11/17/2016	M	6000009295	
	Date of filing/registration in Florida	4,	Document number	
(a) _	CORPORATION SERVICE COMPANY			
	gistered Agent and Registered Office shown on the records of th	e Florida De	pt. of State.	22
1	1201 HAYS ST			2018
Re	rgistered Office Address (MUST BE FLORIDA STREET AL			
	TALLAHASSEE, FL	32301		22 PH 3: 34
				$\phi = \omega$
	TCTCORPORATION SYSTEM			
1,411	and of the respective speed and of the result of the	inte augres	<u>2</u> .	
1:	200 SOUTH PINE ISLAND ROAD			
NE	W Registered Office Address			
Pl	_ANTATION, FL	33324		
change 11 will i /were a	ed liability company is not organized under the laws or changes are made, the Florida street address of th be identical. Or, in the case of a Florida limited liabi authorized by an affirmative vote of the members of t of organization or the operating agreement of the lir	e registeri lity comp he limited	ed office and the business office o any, it is hereby confirmed that the liability company or as otherwise	f the registered e change(s)
	Jue E. CiQuit	Jill Ci	lmi, Authorized Person	
gnalute c	a heinber or authorized representative of a member		Printed or typed name of signe	e
treby a visions obligati terely r fied in t	ccept the appointment as registered agent and agree of all statutes relative to the proper and complete pe ions of my position as registered agent as provided f eflect a change in the registered office address. I her writing of this change.	to act in I rformance or in Chai reby confi	his capacity. I further agree to ca of my duties, and I cm familiar w ster 605, F.S. Or, if this documen m that the limited Tiability compa	omply with the vitn and accept t is being filed ny has been
	Registered Agent CT CORPORATION SYSTEM B			
nature of	Registered Agent CT CORPORATION SYSTEM	Y: Kath	iy Widdoes, Vice President	

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00

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