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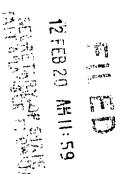
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Append.
02/23/12

COVER LETTER

TO: Amendment Section

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION: ____ DOCUMENT NUMBER: _____ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: MARK P SIMON

Name of Contact Person AIR TEMP INC

Firm/ Company

1420 CELEBRATION BIVE Ste 200

Address

CELEBRATION, FL 34747

City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Mark Simon at (407) 342-0508

Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$43.75 Filing Fee & \$43.75 Filing Fee & □ \$35 Filing Fee □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

AIR TEMR IN	vC.
(Name of Corporation as currently filed with the	Florida Dept. of State)
	5/650
. (Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
	on as currently filed with the Florida Dept. of State) On 1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to we name of the corporation: The new contain the word "corporation," "company," or "incorporated" or the abbreviation estignation "Corp," "Inc," or "Co". A professional corporation name must contain the ociation," or the abbreviation "P.A." 1420 Celegration BIVD ASTREET ADDRESS) Ste 200 CELEBRATION, FL 34747 Dipplicable: ST OFFICE BOX) Li and/or registered office address in Florida, enter the name of the Diew registered office address: (Florida street address) (City) (City) (Zip Code) (Zip Code)
B. Enter new principal office address, if applicable:	_ 1420 CELEBRATION BIVD
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	•
	CELEBRATION, FL 34/4)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	52 Riley Rd Ste 260
	CELEBRATION FL 34747
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	
Name of New Registered Agent	
(Florida str	rect address)
New Registered Office Address:	Florida
	(Zip Code).
New Registered Agent's Signature, if changing Registered Agent	:
nereby accept the appointment as registered agent. I am jamittar	with and accept the obligations of the position.
Signature of New Pagistawad	Agent if changing
Signature of New Registered A	igom, ij onunging

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added: (Attach additional sheets, if necessary)					
P = President; V = Vice	President = Chief l	le by the first letter of the office title: t; T= Treasurer; S= Secretary; D= Director; TR= T Financiul Officer. If an officer/director holds more or would be PTD.			
	ives the c	llowing manner. Currently John Doe is listed as the orporation, Sally Smith is named the V and S. These ly Smith, SV as an Add.			
Example: X Change	<u>PT</u>	John Doe			
X Remove	<u>V</u>	Mike Jones			
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s		
1) Change Add Remove	<u>VP</u>	ARTHUK MASAKOW	247 WALPOLE LOOP DAVENPORT FL		
2) Change Add Remove					
3) Change Add Remove					
4) Change Add Remove					
5) Change Add Remove					

6) ____ Change ___ Add

Remove

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	•
	dment provides for an exchange, reclassification, or cancellation of issued shares,
	s for implementing the amendment if not contained in the amendment itself: t applicable, indicate N/A)
(0	ANCELLATION OF ARTHUR JASAKOW SHARES
	·
	IE to FINANCIAL OBLIGATIONS NOT BEING ME
<u> </u>	CLASSIFICATION OF (5000) SHARES to OWNE
Mr	ARK SIMON AND (5000) SHARES to OWNE
	Hard Kalogris
Kic	HQLO FOIOGRIS

The date of each amendment(s) ad-	option:
Effective date if applicable:	
•	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adop by the shareholders was/were suf	pted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for	for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
☐ The amendment(s) was/were adopt action was not required.	pted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adoptaction was not required.	pted by the incorporators without shareholder action and shareholder
Dated	2-17-12
selected	rector, president of other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)
арроппе	a inductary by that inductary)
_	(Typed or printed name of person signing)
	(Typed or printed name of person signing)
	PRES
_	(Title of person signing)