P01000101789

Office Use Only



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COVER LETTER

TO: Amendment Sect Division of Corpo				
NAME OF CORPOR	RATION: Citrus Air C	onditioners	s, Inc.	
	BER: P0100010178			
The enclosed Articles	of Amendment and fee are sub	omitted for filing.		
Please return all corres	spondence concerning this mat	ter to the following	g:	
	Cynthia Thompso	n		
		Name of Conta	ct Person	·
	Citrus Air Condition	oners, Inc		
		Firm/ Com	pany	
	155 Century Blvd			
		Addres	s	
	Bartow FL 33830	-		
		City/ State and	Zip Code	
cth	ompson@citrusair	ine com		
	E-mail address: (to be us		al report no	tification)
	(•	,
For further informatio	n concerning this matter, pleas	e call:		
Cynthia Thor	npson	at (86		648-0637
Name of Contact Person			Area Code	& Daytime Telephone Number
Enclosed is a check fo	r the following amount made p	ayable to the Flor	ida Departi	ment of State:
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Certified Copy (Additional coenclosed)	у	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amo Divi P.O	iling Address endment Section ision of Corporations Box 6327 ahassee, FL 32314		Division Clifton B 2661 Exe	ent Section of Corporations

Articles of Amendment to Articles of Incorporation of

Citrus Air Conditioners, I			
(Name of Corporation as P01000101789	currently filed with the	: Florida Dept. of State)	
	t Number of Corporation	(if known)	
	•	,	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, th	is Florida Profit Corporation adopts the following amendment	ent(s) to
A. If amending name, enter the new na	me of the corporation:		
n/a		The new	v
name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associate	ation "Corp," "Inc," or	tion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the P.A."	n e
B. Enter new principal office address, i (Principal office address MUST BE A ST		n/a	
C. Enter new mailing address, if applie (Mailing address MAY BE A POST C		n/a , , , , , , , , , , , , , , , , , , ,	
		19 4	
D. If amending the registered agent and new registered agent and/or the new		dress in Florida, enter the name of the ss:	``udiqi
Name of New Registered Agent	n/a	* 	
	(Florida :	street address)	
New Registered Office Address:	n/a	, Florida	
	(Cit	y) (Zip Code)	
New Registered Agent's Signature, if ch I hereby accept the appointment as registe	anging Registered Age red agent. I am familia	nt: r with and accept the obligations of the position.	
- Sig	nature of New Registered	l Agent, if changing	

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)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change. Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u> <u>Jo</u> l	hn Doe	
X Remove	<u>V</u> <u>Mi</u>	ike Jones	
<u>X</u> Add	<u>SV</u> <u>Sa</u>	lly Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	<u>T</u>	Nicole C Burzynski	1209 Heidi Lane N
Add			Lakeland FL 33813
X Remove	\ <u> </u>	•	
2) Change	····		
Add			
Remove			
3) Change		<u> </u>	
Add			
Remove			
4) Change			
Add	\		
Remove			
5) Change			
Add			
Remove			
		•	
6) Change			
Add			
Remove			

If amending or adding additional Attach additional sheets, if necessar,	ry). (Be specific)
/a	
	
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	•
If an amount movides for an	exchange, reclassification, or cancellation of issued shares,
provisions for implementing the	amendment if not contained in the amendment itself:
(if not applicable, indicate N/A	4)
'a	
No. of Proceedings of the Control of	
Name:	
s, appr	
N _e and P	
s, and the second secon	

3.40°	

The date of each amendment(s) a	doption: May 1, 2012
Effective date if applicable:	ay 1, 2012
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.
	proved 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 the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
action was not required.	opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder
Dated July 1	7, 2012
(By a d	rector, president or other officer - if directors or officers have not been
	id, by an incorporator – if in the hands of a receiver, trustee, or other court
appoin	nted fiduciary by that fiduciary)
/	Joseph Dicesare
,	(Typed or printed name of person signing)
	Vice President
	(Title of person signing)