P03000104220

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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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AUG 2 9 2014 C. CATTOTI (TO)

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Advantage Lo	ogistics Systems, Inc.		
DOCUMENT NUMBER: P03000104220			
The enclosed Articles of Amendment and fee are submitted for	filing.		
Please return all correspondence concerning this matter to the following:			
Mr. Hector M	liramontes		
(Name of	Contact Person)		
Advantage Logistics	s Systems, Inc.		
(Firm/ Company)			
2364 SW 34 Street Suite B			
(,	Address)		
Ft. Lauderdale, FL	33312-5021		
(City/ State and Zip Code)			
geroomairfll@gmail.com E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Mr. Hector Miramontes	954 797-7577		
(Name of Contact Person)	(Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount made payable to the	ne:Florida Department of State:		
	ed Copy Certificate of Status onal copy is Certified Copy		
(Mailing Address) Amendment Sections (Division of Corporations (P.O., Box. 6327) (Tallahassee, FL 32314)	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		

Articles of Amendment Articles of Incorporation

(Document Number of Corporation (if known)

Advantage Logistics Systems, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

P03000104220

Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following

amendment(s) to its Articles of Incorporation:	
A. If amending name, enter the new name of the corp	poration:
Advantage Air Conditioning Solu	utions, Inc. The ne
name must be distinguishable and contain the word "con" "Company" or "Co." may not be used in the name.	rporation" or "incorporated" or the abbreviation "Corp." or "Inc.
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR	N/A RESS)
C. Enter new mailing address, if applicable:	NI/A
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	, N/A
D. If amending the registered agent and/or registered new registered agent and/or the new registered of	d office address in Florida, enter the name of the
Name of New Registered Agent: N/A	
New Registered Office Address:	(Florida street address)
	, Florida
((City) (Zip Code)
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I detailed the second of the composition of the second of the se	tered Agent: am familiar with and accept the obligations of the position.
Signature of	New Registered Agent, if changing

Page 1 of 4

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 X_Remove X_Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith		
Type of Action (Check One)	Title	<u>Name</u>		<u>Addres</u> s
1) Change		N/A		
Add				
Remove				
2) Change			<u>.</u>	
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change	_			
Add				
Remove				
6) Change				
Add				
Remove				

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)				
(attach additional sheets, if necessary).	(Be specific)			
N/A				
<u></u>				
				

The date of each amendment(s) add	August 12, 2014	, if other than the
date this document was signed		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add was/were sufficient for approval	opted by the members and the number of votes cast for the amendment(s).	
There are no members or members adopted by the board of director	ers entitled to vote on the amendment(s). The amendment(s) was/were rs.	
Dated / E	3-20-14	
Signature VA	A	
(By the chairr have not bee	man or vice chairman of the board, president or other officer-if directors in selected, by an incorporator – if in the hands of a receiver, trustee, or provinted fiduciary by that fiduciary)	
	Mr. Hector Miramontes	
((Typed or printed name of person signing)	
	President	
	(Title of person signing)	