P03000145006

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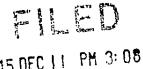
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION:	ERATION & AIR, INC.		
DOCUMENT NUM	BER: P03000145006	***		
	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this mat	tter to the following:		
	Benjamin Y. Saxon II, Esq.			
		Name of Contact Person	n	
	SAXON & CHAKHTOURA	, P.A.		
		Firm/ Company		
	111 South Scott Street		•	
		Address		
	Melbourne, FL, 32901			
		City/ State and Zip Cod	e	
	Chuckcoast94@g	maîl.com		
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	on concerning this matter, pleas	at (321	727-2545	
	of Contact Person	at (de & Daytime Telephone Number	
	or the following amount made p		• •	
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section 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 to **Articles of Incorporation** of



COAST REFRIGERATION & AIR, INC.

15 DEC 11 PM 3: 08

(Name o	f Corporation as currentl	y filed with the Florida Dep	OI. OF STATE CRETARY OF STATE TALLAHASSEE, FLORII
P03000145006			IALLANAGGE
	(Document Number o	Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation a	idopts the following amendment(s) t
A. If amending name, enter the new na	me of the corporation:		
N/A			The new
name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the designo word "chartered," "professional associat	ation "Corp," "Inc," or '	Co". A professional corpor	
B. Enter new principal office address, i	f annling bles	N/A	
(Principal office address <u>MUST BE A ST</u>			
			·
C. Enter now welling address if applic	a a b la s		
C. Enter new mailing address, if applie (Mailing address MAY BE A POST C		N/A	
	·		
D. If amending the registered agent and	d/or registered office add	ess in Florida, enter the na	me of the
new registered agent and/or the new			
Name of New Registered Agent	Charles Silva		
	3330 Lakeview Circle, M	lbourne, FL, 32934	
	(Florida str	eet address)	
V D V 100 444	N/A		P1 - '-1-
New Registered Office Address:		(Citv)	_, Florida (Zip Code)
		,	
New Registered Agent's Signature, if cl			
I hereby accept the appointment as registe	ered agent. I am familiar	with and accept the obligation	ns of the position.
	<i>f f</i>		
('')	Japan S.I		
	Signature of New I	egistered 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	PT John	n Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	SV Sall	y Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	P	Michael J. Izzo	
Add X Remove			
2) X Change	D/P/T	Charles Silva	3330 Lakeview Circle
Add			Melbourne, FL 32934
Remove 3) X Change	D/V. /S	Gerard J. Bornemann	1106 Acapella Drive
Add			Melbourne, FL 32940
Remove			
4) Change			
Add			
Remove			
5) Change			
Adđ			
Remove			
6) Change		 	
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)					
N/A	•				
			· · - · · · · · · · · · · · · · · · · ·		
<u>-</u> .					
					
•					
			<u> </u>		
		<u> </u>			
. If an a	mendment provides for an sions for implementing the	exchange, reclassific	cation, or cancellat	ion of issued shar	es,
<u>provi</u> (<i>i</i>	f not applicable, indicate N.	4)	ontained in the aim	enument usen.	
N/A					
					
					
					

	NAXMAX	XXXX Decem	ıber	2,	2015	: C - 41 41 41
The date of each amendmen late this document was signed			•			, if other than t
Effective date <u>if applicable</u> :	Maximber 3, 2018 x	December	2,	201	5	
meenve date <u>mappheable</u> .	(no mo	re than 90 days after	amena	lment fi	le date)	
Note: If the date inserted in ocument's effective date on t			ory filir	ng requ	rements, this	date will not be listed as t
Adoption of Amendment(s)	(CHECK O	NE)				
The amendment(s) was/we by the shareholders was/w	re adopted by the sharehold ere sufficient for approval.	ders. The number of	votes c	ast for	the amendmen	1(s)
The amendment(s) was/we must be separately provide	re approved by the shareho					nent
. "The number of vote	s cast for the amendment(s) was/were sufficient	for app	oroval		
by				.,,		
	(voting grou	p)				
The amendment(s) was/we action was not required.	re adopted by the board of	directors without sha	arehold	er actio	n and sharehol	der
The amendment(s) was/we action was not required.	re adopted by the incorpora	ators without shareho	older ac	tion an	d shareholder	
አኒክ Dated	Decemb	er 2, 2015				
Signature _	Charles	Silva	<u> </u>			
`	By a director, president or of elected, by an incorporator					
	ppointed fiduciary by that t		I I CCCI V	or, mus	ec, or other co	
	Charles Silva					
	(Typed o	r printed name of per	rson sig	ning)		
	Director/President/T	reasurer				
•		(Title of person si	anina)			