P03000145006

| (R | equestor's Name) | |
|---|-----------------------|---------------|
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| PICK-UP | ☐ WAIT | MAIL |
| (B | usiness Entity Name | e) |
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| Certified Copies | Certificates o | of Status |
| Special Instructions to Filing Officer: | | |
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ECRETARY OF STATE

COVER LETTER

TO: Amendment Section

Division of Corporations

Coast Refrigeration & Air, Inc. NAME OF CORPORATION: _ PO3000145006 DOCUMENT NUMBER: _ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Charles Silva Name of Contact Person Coast Refrigeration & Air Firm/ Company 2317 N Wickham Rd Address Melbourne City/ State and Zip Code chuckcoast94@mail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Charles Silva Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ☐\$43.75 Filing Fee & ☐\$43.75 Filing Fee & □\$52.50 Filing Fee S35 Filing Fee Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is (Additional Copy enclosed) is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section **Division of Corporations** Division of Corporations The Centre of Tallahassee P.O. Box 6327 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32314

Tallahassee, FL 32303



RECEIVED

2022 MAR -7 PM 12: 16.

SECRETARY OF STATE TALLAHASSEE, FL

February 22, 2022

CHARLES SILVA 2317 N WICKHAM ROAD MELBOURNE, FL 32935

SUBJECT: COAST REFRIGERATION & AIR, INC.

Ref. Number: P03000145006

We have received your document for COAST REFRIGERATION & AIR, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers listed.

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) 245-6050.

Letter Number: 222A00004335

Claretha Golden Regulatory Specialist II

www.sunbiz.org

Articles of Amendment to Articles of Incorporation of

FILED

to

| Coast Refrigeration & Air, Inc. | 2022 MAR - 7 PM 4: 33 |
|--|--|
| (Name of Corporation as cur | icum nicu wini inc rivilua Debi. Vi Stater |
| P03000145006 | SECRETARY OF STATE TALLAHASSEE, FL |
| (Document Numb | ber of Corporation (if known) |
| Pursuant to the provisions of section 607.1006, Florida Statutes, ts Articles of Incorporation: | this Florida Profit Corporation adopts the following amendme |
| A. If amending name, enter the new name of the corporation | <u>n:</u> |
| NA | The new |
| name must be distinguishable and contain the word "corporation "Inc.," or Co.," or the designation "Corp," "Inc," or "Co "chartered," "professional association," or the abbreviation "I | n," "company," or "incorporated" or the abbreviation "Corp.," ". A professional corporation name must contain the word |
| B. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS) | NA |
| , | |
| C. Enter new mailing address, if applicable: | |
| (Mailing address MAY BE A POST OFFICE BOX) | NA |
| | |
| | |
| If amending the registered agent and/or registered office new registered agent and/or the new registered office add | |
| Name of New Revistered Avent | |
| | |
| (Floria | da street address) |
| New Registered Office Address: | , Florida |
| mee name. | (City) (Zip Code) |
| Name of New Registered Agent | da street address) |
| | |
| ew Registered Agent's Signature, if changing Registered Agereby accept the appointment as registered agent. I am family | gent: liar with and accept the obligations of the position. |
| ,, | |
| | |
| · · · · · · · · · · · · · · · · · · · | |
| Signature of Ne | ew Registered Agent, if changing |

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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> | John Doe | | | | |
|----------------------------|--------------|---------------|-----|-------------|-------------------|----------|
| X Remove | <u>v</u> | Mike Jones | | | | |
| X Add | <u>sv</u> | Sally Smith | | | | |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | | | <u>Addres</u> s | |
| 1) Change | V/S | Joseph C Silv | va. | | 1397 Sagola St SE | |
| X Add | | | | | Palm Bay FL 32909 | |
| Remove | | | | | | |
| 2) Change | | | | | | |
| Add | | | | | | |
| Remove 3) Change | | | | | | |
| Add | | | | | | |
| Remove | | | | | | |
| 4) Change | | | | | | |
| Add | | | | | | |
| Remove | | | | | * | |
| | | | | | | |
| 5) Change | | | | | | |
| Add | | | | | | |
| Remove | | | | | | <u> </u> |
| 6) Change | | _ | | | | |
| Add | | | | | | |
| Remove | | | | | | |

| Attach additional sheets, if necessary). | . (Be specific) |
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| f an amendment provides for an exc | change, reclassification, or cancellation of issued shares, |
| cif not applicable, indicate N/A) | nendment if not contained in the amendment itself: |
| | |
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| | January 19, 2022 | |
|---|---|-------------------------------|
| The date of each amendment(s) a date this document was signed. | doption: | , if other than the |
| Effective date <u>if applicable</u> : | | |
| | (no more than 90 days after amendment file date) | |
| Note: If the date inserted in this be document's effective date on the De | clock does not meet the applicable statutory filing requirements, this department of State's records. | ate will not be listed as the |
| Adoption of Amendment(s) | (CHECK ONE) | |
| The amendment(s) was/were add action was not required. | opted by the incorporators, or board of directors without shareholder act | ion and shareholder |
| ☐ The amendment(s) was/were add by the shareholders was/were su | opted by the shareholders. The number of votes cast for the amendment afficient for approval. | .(s) |
| | proved by the shareholders through voting groups. The following statem each voting group entitled to vote separately on the amendment(s): | tent |
| "The number of votes cast | for the amendment(s) was/were sufficient for approval | |
| by | (voting group) | |
| January 19 Dated | , 2022 | |
| Signature | Charles Silva | |
| selecte | irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other couted fiduciary by that fiduciary) | |
| | Charles Silva | |
| | (Typed or printed name of person signing) | |
| | President | |

(Title of person signing)