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TALLAHASSEE, FLORIE

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R. WHITE

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	RATION: Ross Air Condition	ing & Heating Service Inc	
DOCUMENT NUMI	BER:		
	of Amendment and fee are sul	bmitted for filing.	
Please return all corre	spondence concerning this mat	ter to the following:	
	Scott T Ross		
		Name of Contact Persor	<u> </u>
	Ross Air Conditioning & Hea	ating Service Inc	
		Firm/ Company	
	PO Box 130	, ,, Copan,	
		Address	
	Edgewater FL 32132		
		City/ State and Zip Code	<u> </u>
	_		
penn	y@ymmtax.com		
	E-mail address: (to be us	sed for future annual report	notification)
12 on firmbon in Communic	on concerning this matter, pleas	yn gollt	
ror further mormane	in concerning this matter, pieas	se can.	
Scott T Ross		at (386	de & Daytime Telephone Number
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:
		'	
■ \$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)
Ma	niling Address	Street	Address
Amendment Section		Amendment Section	
Division of Corporations		Division of Corporations	
P.O. Box 6327			Building
Tallahassee, FL 32314		2661 Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

poration ______

Ross Air Conditioning & Heating Service Inc

(Name of Corneration as curren	ntly filed with the Florida Dentl of State)
04000084708	i = to the total t
(Document Number	of Corporation (if known)
ursuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s
. If amending name, enter the new name of the corporation:	
ame must be distinguishable and contain the word "corporate Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or ord "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
Enter new principal office address, if applicable:	2225 Guava Drive #C
Principal office address <u>MUST BE A STREET ADDRESS</u>)	Edgewater FL 32141
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	PO Box 130
in the same of the	Edgewater FL 32132
. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre	
Name of New Registered Agent	
(Florida s	street address)
New Registered Office Address: 2225 Guava Drive #C, E	dgewater, Florida 32141
	(City) (Zip Code)
ew Registered Agent's Signature, if changing Registored Agen pereby accept the appointment as registered agent. Yam familian	<u>nt:</u> r with and accept the obligations of the position.
Signature of New	Registered 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 <math>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>	Address
1) Change			
Remove			
2) Change			
Remove			
3) Change			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).		
-		-
f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,	
provisions for implementing the amer (if not applicable, indicate N/A)	endment if not contained in the amendment itself:	
· · · · · · · · · · · · · · · · · · ·		
,		
	-	

	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> :	
(no m	ore than 90 days after amendment file date)
Note: If the date inserted in this block does not meet document's effective date on the Department of State's	the applicable statutory filing requirements, this date will not be listed as the records.
Adoption of Amendment(s) (CHECK C	<u>ONE</u>)
■ The amendment(s) was/were adopted by the shareholders was/were sufficient for approva	
☐ The amendment(s) was/were approved by the sharel must be separately provided for each voting group	nolders through voting groups. The following statement entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval
by	···
(voting gro	up)
☐ The amendment(s) was/were adopted by the board of action was not required.	of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporaction was not required.	orators without shareholder action and shareholder
9-21-15 Dated	
Signature	
(By director, president e	r other officer - if directors or officers have not been
selected, by an incorporate	or – if in the hands of a receiver, trustee, or other court
appointed fiduciary by tha	t fiduciary)
Scott T Ross	
(Typed	or printed name of person signing)
President	
	(Title of person signing)