

PO4000131972

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

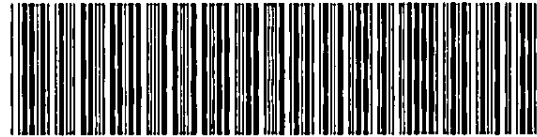
(Business Entity Name)

(Document Number)

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J. FASON

JUL 01 2021

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** COOL CONTROL, INC.

**DOCUMENT NUMBER:** P04000131972

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

GERARD McINTYRE  
Name of Contact Person  
COOL CONTROL, INC.  
Firm/ Company  
8480 NW 14th STREET  
Address  
CORAL SPRINGS FL 33071  
City/ State and Zip Code  
gerardmcintyre@bellsouth.net  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

COLLEEN McINTYRE at ( 954 ) 478 8926  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- |  |  |   |   |
|--|--|---|---|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input checked="" type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy<br>is enclosed) |
|--|--|---|---|

**Mailing Address**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**  
Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Articles of Amendment  
to  
Articles of Incorporation  
of

COOL CONTROL, INC.

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

P04000131972

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

*The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."*

**B. Enter new principal office address, if applicable;**  
(Principal office address MUST BE A STREET ADDRESS)

**C. Enter new mailing address, if applicable;**  
(Mailing address MAY BE A POST OFFICE BOX)

P.O. BOX 772405

CORAL SPRINGS FL 33077

**D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

Name of New Registered Agent GERARD McINTYRE

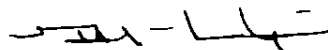
8480 NW 14th STREET

(Florida street address)

New Registered Office Address: CORAL SPRINGS, Florida 33071  
(City) (Zip Code)

**New Registered Agent's Signature, if changing Registered Agent:**

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*



Signature of New Registered Agent, if changing

**Check if applicable**

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

2021 JUL 25 PM 1:16

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change	DPVT	COLLEEN McINTYRE	8480 NW 14th STREET
<input type="checkbox"/> Add			CORAL SPRINGS FL 33071
<input checked="" type="checkbox"/> Remove			
2) <input checked="" type="checkbox"/> Change	DPVT	GERARD McINTYRE	8480 NW 14th STREET
<input type="checkbox"/> Add			CORAL SPRINGS FL 33071
<input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change			
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<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

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100 % OF SHARES TO BE TRANSFERRED TO NEW DPVT GERARD McINTYRE

The date of each amendment(s) adoption: \_\_\_\_\_, if other than the date this document was signed.

MAY 20th 2021

Effective date if applicable: \_\_\_\_\_  
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

- ☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
- ☒ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for 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)"

MAY 17th 2021  
Dated \_\_\_\_\_

Signature Colleen McIntyre  
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

COLLEEN McINTYRE

\_\_\_\_\_  
(Typed or printed name of person signing)

DPVT

\_\_\_\_\_  
(Title of person signing)

2021 MAY 25 PM 1:18