2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P06000003688

1. Entity Name
CAPABLE COOLING, INC.

FILED
Dept of State
07 OCT -1 PM 3:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
~~2239 BRUNER LANE~~ ~~FORT MYERS, FL 33912~~	~~2239 BRUNER LANE~~ ~~FORT MYERS, FL 33912~~

REINSTATEMENT 07

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
1357 No. Miami TRL	1357 No. Miami TRL
Suite, Apt. #, etc.: Unit B+C	Suite, Apt. #, etc.: Unit B+C
City & State: No. Ft. Myers, FLA.	City & State: No. Ft. Myers, FLA.
Zip: 33903 Country: USA	Zip: 33903 Country: USA

4. FEI Number: 20-4470957 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CEDENO, JOSE A JR ~~2230 BRUNER LANE~~ ~~FORT MYERS, FL 33912~~	Name Street Address (P.O. Box Number is Not Acceptable): 2206 S.E. 18th PLACE City: CAPE CORAL FL Zip Code: 33990

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with and accept the obligations of registered agent.

SIGNATURE: José A. Cedeno 9/28/07
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) Date

FILE NOW!!! FEE IS $150.00
After January 1, 2008, Fee will be $300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~PD~~ CEDENO, JOSE A JR. 2206 SE 18TH PLACE CAPE CORAL, FL 33990	☐ Delete	DIRECTOR	☒ Change ☐ Addition
		☐ Delete	PRESIDENT / TREASURER MARITZA CAMPOS 2206 S.E. 18th PLACE CAPE CORAL, FLA. 33990	☐ Change ☒ Addition
		☐ Delete	VICE PRESIDENT / SECY HOPE E. CASTELLI 2545 68th STREET, WEST LEHIGH ACRES, FLA. 33971	☐ Change ☒ Addition
	$10/3	☐ Delete	100110271151 10/04/07--01037--001 **150.00	☐ Change ☐ Addition
		☐ Delete		☐ Change ☐ Addition
		☐ Delete		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: José A. Cedeno 9/28/07 (954)415-4939
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #