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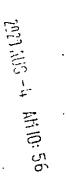
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Cool Solutions of	Central Florida, Inc.	
DOCUMENT NUM	D06000120046		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Michael P. Kelton, Esq.		
		Name of Contact Perso	n
	Kelton Law, P.A.		
		Firm/ Company	
	601 Deltona Blvd., Suite 102		
		Address	
	Deltona, FL 32725		
		City/ State and Zip Cod	e
	mkelton@keltonlawpa.com	sed for future annual report	notification
	E-mail address: (to be us	sed for future annual report	notificationy
For further informatio	n concerning this matter, plea	se call:	
Michael P. Kelton, Es	q.	386	de & Daytime Telephone Number
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check fo	or the following amount made	payable to the Florida Dep	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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Ameno Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Cool Solutions of Central Florida, Inc.

Check if applicable

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

(Name	of Corporation as current	ly filed with the Florida Dept. of State)	
P06000139946			
	(Document Number of	of Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this	Florida Profit Corporation adopts the fol	lowing amendment(s)
A. If amending name, enter the new n	ame of the corporation:		
n/a			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "Chartered," "professional association,	Corp," "Inc," or "Co"	company," or "incorporated" or the abbre A professional corporation name must c "	eviation "Corp.," contain the word
B. Enter new principal office address,		505 Whitecap Cove Court	~
(Principal office address MUST BE A S		DeBary, FL 32713	Anza Nus
			ne ,
			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		505 Whitecap Cove Court	<u> </u>
(11.4.1.1.8.4.1.1.1.1.1.1.1.1.1.1.1.1.1.1		DeBary, FL 32713	AF 10:
			9
D. If amending the registered agent an new registered agent and/or the new Name of New Registered Agent			
Transe of the Rogister curricum	601 Deltona Blvd., Suite I	02	
	(Florida st	reet address)	
New Registered Office Address:	Deltona	, Florida,	725
		(City)	(Zip Code)
New Registered Agent's Signature, if a I hereby accept the appointment as registered.	thanging Registered Agent tered agent. I am familiar	<u>:</u> with and accept the obligations of the posi	tion.
	M	·	
	Signature of New R	egistered Agent, if changing	
	- G J		

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)

Example:

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.

X Change	<u>PT</u>	John Doe		
X Remove	$\underline{\mathbf{V}}$	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) X Change	VD	William T. Kirkpatrick	2341 Ainsworth Avenue	
Add	_		Deltona, FL 32725	
Remove 2) Change	PD	Darren D. Ochs	505 Whitecap Cove Court	
X Add			DeBary, FL 32713	
Remove 3) Change	STD	Jacqueline A. Ochs	505 Whitecap Cove Court	
X Add			DeBary, FL 32713	
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

	lditional sheets, if necessary).	(Be specific)			
					 -
					
		 			
					
					
					
				<u> </u>	
	ndment provides for an excl	hange, reclassificatio	n, or cancellation	of issued shares,	
lf an ame				nant itcalf:	
provision	ns for implementing the ame	endment if not contai	<u>ined in the amendr</u>	nent nzen.	
provision	ns for implementing the ame of applicable, indicate N/A)	endment if not contain	ined in the amends	neili itzeit.	
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provision (if no	ns for implementing the ame	endment if not contai	ined in the amends	HERL RISERT.	
provision (if no	ns for implementing the ame	endment if not conta	ined in the amends	HEIL IISEII.	
provision (if no	ns for implementing the ame	endment if not conta	ined in the amends	HERT RISERT.	
provision	ns for implementing the ame	endment if not conta	ined in the amends	HEIL IISEII.	
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provision (if no	ns for implementing the ame	endment if not contain	ined in the amends	HEIL IISEII.	
provision (if no	ns for implementing the ame	endment if not contain	ined in the amends	HERT RISERT.	

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	July 26, 2020
The date of each amendment(s) a	doption:, if other than the
date this document was signed.	
July Effective date <u>if applicable</u> :	26, 2020
Effective date it applicable.	(no more than 90 days after amendment file date)
Note: If the date inserted in this bedocument's effective date on the De	clock does not meet the applicable statutory filing requirements, this date will not be listed as the epartment of State's records.
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 action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were st	opted by the shareholders. The number of votes cast for the amendment(s) officient for approval.
☐ The amendment(s) was/were app must be separately provided for	proved by the shareholders through voting groups. The following statement 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
n/a by	·"
•	(voting group)
July 29, 20	20
Signature	
	rector, 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 court red fiduciary by that fiduciary)
	Darren D. Ochs
	(Typed or printed name of person signing)
	President
	(Title of person signing)