## P070000 6 3730

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	<del></del>
		}





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S. TALLENT APR 23 2018





March 21, 2018

SONYA GREENE PRECISION REFRIGERATION, INC. P O BOX 35367 PANAMA CITY, FL 32412

SUBJECT: PRECISION REFRIGERATION, INC.

Ref. Number: P07000063730

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document submitted cannot be filed to make changes in the officers/directors of a corporation. Enclosed is the correct form for making these changes.

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.

Susan Tallent Regulatory Specialist II

Letter Number: 418A00005667

18 APR 20 PH 2: 10.

## **COVER LETTER**

TO: Amendment Section Division of Corporations			
NAME OF CORPORATION: PO 7 0000	n hetrigeration, luc.		
DOCUMENT NUMBER: 107000	63730		
The enclosed Articles of Amendment and fee are su	bmitted for filing.		
Please return all correspondence concerning this ma	tter to the following:		
	Sonya Greene Name of Contact Person		
/	Name of Contact Person		
	Precision Retrigoration  Firm/Company		
	0 BOX 35367		
D	Address		
<u> </u>	City/ State and Zip Code		
	City/ State and Zip Code		
Drev	Sion Sonya @ Smail Com V sed for future annual report notification)		
E-mail address: (to be us	sed for future annual report notification)		
For further information concerning this matter, please	se call:		
0 0	2.2		
Name of Contact Person	at ( <u>880</u> ) <u>630-9999</u> Area Code & Daytime Telephone Number		
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:		
\$35 Filing Fee \$\text{Certificate of Status}\$	□\$43.75 Filing Fee & □\$52.50 Filing Fee  Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee  Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address	Street Address		
Amendment Section Division of Corporations	Amendment Section Division of Corporations		
P.O. Box 6327 Clifton Building			
Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301			

## **Articles of Amendment**

to Articles of Incorporation

Attice	of		
Vanicia halia	· · · · · · · · · · · · · · · · · · ·		
(Name of Cornoration asso	urrently filed with the Flori	ida Dent, of State)	_
	•	an Depart of State	
<u> </u>	<u>Ψ5150</u> imber of Corporation (if know		_
·	• •	•	
Pursuant to the provisions of section 607.1006, Florida Statut its Articles of Incorporation:	es, this Florida Profit Corpo	ration adopts the following amendment(	(s)
A. If amending name, enter the new name of the corporate	tion:		
		The new	
name must be distinguishable and contain the word "corp.," "Inc.," or Co.," or the designation "Corp," "Inc word "chartered," "professional association," or the abbrev	c," or "Co". A professional		
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	र्केट्ट क्व	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)			
(17 morphi Office had case in Cost Day to the at 1, 200, 200	,	<u> </u>	T
			Ė
		Park Comments	E.
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		i e œ	***
(Mutting dudress MAT BE A FOST OFFICE BOX)	<del></del>		
		ा होते हैं . होतह 19 <sup>18</sup> प्रकार	
D. If amending the registered agent and/or registered offi new registered agent and/or the new registered office:		the name of the	
Name of New Registered Agent			
	<del></del>		
(F).	orida street address)		
New Registered Office Address:	(6)	, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa		oligations of the position.	
Signature o	of New Registered Agent if ch	anging	

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.

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	<u>S</u>	Charles Breitenbach	403 Liverpool Are
Add		Charles Breitenbach	Parama City Beach F
Remove			32407
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	(Be specific)
	·
f an amendment provides for an excl provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
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provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:

The date of each amendment(s) adoption:date this document was signed.	03/15/18	, if other than the
11	09, 2018 o more than 90 days after amendment file date)	
(no	o more than 90 days after amendment file date)	
Note: If the date inserted in this block does not me document's effective date on the Department of State	neet the applicable statutory filing requirements, this date we's records.	vill not be listed as the
Adoption of Amendment(s) (CHECK	CONE)	
☐ The amendment(s) was/were adopted by the share by the shareholders was/were sufficient for approx	eholders. The number of votes cast for the amendment(s) oval.	
	reholders through voting groups. The following statement up entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendmen	••	
by	group) ."	
(voting g	şroup)	
☐ The amendment(s) was/were adopted by the board action was not required.	d of directors without shareholder action and shareholder	
The amendment(s) was/were adopted by the incoraction was not required.	rporators without shareholder action and shareholder	
Dated Opril 16,	2018 Greene	
Signature	Greene	
(By a director, president	t or other officer – if directors or officers have not been	
	rator – if in the hands of a receiver, trustee, or other court	
appointed fiduciary by the		
	ed or printed name of person signing)	
(Туре	ed or printed name of person signing)	
	President	
	(Title of person signing)	