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SECRETARY OF STATE TALLAHASSEE, FLORIDA

Amandous (10) 9/09

COVER LETTER

Division of Corporations					
NAME OF CORPORATION:	do Cooling Carp.				
DOCUMENT NUMBER:	P08000100727				
The enclosed Articles of Amendment and fee are su	bmitted for filing.				
Please return all correspondence concerning this matter to the following:					
Brandon Smi	of Contact Person				
Cotorado Cooli v	m/Company				
3564 S. Milit	ary ran. Sto B.				
Lake worth F	tate and Zip Code				
Brandon Gederal E-mail address: (to be used for	-Insurance, com future annual report notification)				
For further information concerning this matter, please call:					
Syand(NSmtt) Name of Contact Person	at (Slo L) 965 22 CV Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount made	payable to the Florida Department of State:				
□ \$35 Filing Fee	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)				
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle				

Tallahassee, FL 32301

Articles of Amendment

		10
Articles	of	Incorporation
		of

Colcrado Cobli	ns Corp	ORATION	
(Name of Corporation as current	ntly filed with the Florid	a Dept. of State)	
(Document Numb	ber of Corporation (if kno	wn)	
Pursuant to the provisions of section 607.1006 amendment(s) to its Articles of Incorporation:	, Florida Statutes, this F	<i>lorida Profit Corporation</i> ad	opts the following
A. If amending name, enter the new name of	the corporation:		
	***************************************		The new
name must be distinguishable and contain the abbreviation "Corp.," "Inc.," or Co.," or the contain the word "chartered," "profestions. Enter new principal office address, if applications of the contain the word "chartered," "profestions" in the word "c	designation "Corp," "Inc essional association," or icable:	c," or "Co". A professional	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC	<u></u>		SECRETARY OF SLORI TALLAHASSEE, FLORI 109 SEP 22 PH 12:
D. If amending the registered agent and/or re		n Florida, enter the name of	the =
new registered agent and/or the new registered Agent:	tered office address:		
New Registered Office Address:	(Florida street d	address)	
_		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agentials.	gent. I am familiar with a		he position.
Si	gnature of New Registere	d Agent, if changing	

If amonding 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: (Anach additional sheets, if necessary)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
VP	<u>Dient Tonnossen</u>	35/64 SM, litter Pare Worth F1	Add Remove
	additional sheets, if necessary). (Be spe	K(VIE)	
1. 1.15 <i>0</i> 2 L			
provi	amendment provides for an exchange, resions for implementing the amendment for applicable, indicate N/A)		

The date of each amendment(s) adoption:
Effective date if applicable: (date of adoption is required)
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
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)
(voting group)
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated (0 15 09
Signature (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)
(Typed or printed name of person signing)
(Title of person signing)