(Requestor's Name)  (Address)	900200888799		
(Address)			
(City/State/Zip/Phone #)	04/11/1101032027 **43.75		
(Business Entity Name)  (Document Number)			
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#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: 🙇	14 HR Air con	nditioning	\$ Reprigeration, Inc.
DOCUMENT NUMBER:	0000022333		
The enclosed Articles of Amendme	ent and fee are submitted for fi	ling.	
Please return all correspondence co	ncerning this matter to the fol	lowing:	•
Dami'	Name of Contact Perso	n n	<del></del>
	H 12 A/C cycl Firm/ Company	szer.	
10933 C	amino Cir. w	ettim	
_wessing	City/ State and Zip Cod	<b>414</b> le	
1) Carre 1 E-mail addr	ess: (to be used for future annual rep	port notification)	
For further information concerning	this matter, please call:		
Damian Carr Name of Contact Person	era at ( 56/ Area Co		<b>99</b> e Number
Enclosed is a check for the following	ng amount made payable to the	e Florida Department	of State:
\$35 Filing Fee \$43.75 Filing Certificate of	f Status Certified Co	ppy Copy is enclosed) C	52.50 Filing Fee Certificate of Status Certified Copy Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Street Addre Amendment Division of C Clifton Build	Section Corporations	

2661 Executive Center Circle

Tallahassee, FL 32301

### **Articles of Amendment**

## Articles of Incorporation of

Articles of Amendment  to  Articles of Incorporation  of
(Name of Corporation as currently filled with the Florida Dept. of State)
P 10000022 333
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
Rekrigero bion, Inc. 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)  2900 Wood Lake 131vd. # 211  Lake worth, 121 33463
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:
New Registered Office Address: (Florida street address) # 211
Lake worth , Florida 33463 (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

# 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)

Title	<u>Name</u>	<u>Address</u>	Type of Action
<del>-</del>			□ Add □ Remove
	<del></del>		
(attach a	dditional sheets, if necessary). (Be spec	eific)	
<u>provisi</u>	mendment provides for an exchange, reons for implementing the amendment in a applicable, indicate N/A)	classification, or cancellation of the final contained in the amendm	of issued shares, ent itself:

The date of each amendment(s) a	doption: <u>4-7-//</u>
Effective date <u>if applicable</u> :	(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 ad by the shareholders was/were so	lopted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.
	proved by the shareholders through voting groups. The following statemen 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	ing group)
_	lopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were ad action was not required.	lopted by the incorporators without shareholder action and shareholder
Dated	4-7-11
(By a Affi selected	rector, president or other officer – if directors or officers have not been, by an incorporator – if in the hands of a receiver, trustee, or other courted fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	(Title of person signing)