## P10000047996

| (Requestor's Name)                      |
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| PICK-UP WAIT MAIL                       |
|   |
| (Business Entity Name)                  |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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C. CARROTHERS

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORPORATION: MR. KOO   | L-MAN, INC   |  |
|--|--|--|
| DOCUMENT NUMBER: P1000004799   | 96   |  |
| The enclosed Articles of Amendment and fee are su  |  |  |
| Please return all correspondence concerning this ma  | atter to the following:  |  |
| MALVIN CAQUIA  | AS   |  |
|  | Name of Contact Person   | 1  |
| MR. KOOL-MAN   | INC.   |  |
|  | Firm/ Company  | <del></del>  |
| 6932 NEWMAN  | CIRCLE WEST  |  |
| •  | Address  |  |
| LAKELAND, FL 3   | 33811  | •  |
|  | City/ State and Zip Code   | e  |
| mr.kool_man@yaho   | o.com  |  |
|  | sed for future annual report                                       | notification)  |
| For further information concerning this matter, pleas  | se call:   |  |
| Malvin Caquias   | <sub>at (</sub> 813  | , 601-0155   |
| Name of Contact Person   |  | de & Daytime Telephone Number  |
| Enclosed is a check for the following amount made  | payable to the Florida Depa  | artment of State:  |
| □ \$35 Filing Fee  | ■\$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 | Amend<br>Divisio<br>Clifton<br>2661 E                              | Address ment Section n of Corporations Building xecutive Center Circle                 |

## Articles of Amendment to Articles of Incorporation of

|  | Articles of Incorp               | poration                        | And State                              | •               |
|--|----------------------------------|---------------------------------|--|-----------------|
|  | of                               |                                 |  |                 |
| MR. KOOL-MAN INC   |                                  |                                 | 1                                      | 5 T             |
| ` <u> </u>   | currently filed with the Flor    | ida Dept. of State)             | 5 . 3 . 1<br>5 . 3 . 1                 | - I Trans       |
| P10000047996   |                                  |                                 |  |                 |
| (Document  | nt Number of Corporation (if ki  | nown)                           | 5-4 4 5                                | 王〇              |
| Pursuant to the provisions of section 607.   | 1006. Florida Statutes, this Flo | orida Profit Cornoration adon   | ts the following                       | amendment(s) to |
| its Articles of Incorporation:   | <b>,</b>                         |                                 |  | (E)             |
| A. If amending name, enter the new na  | ame of the corporation:          |                                 | <b>#</b> *                             |                 |
|  |                                  |                                 | ,                                      | The new         |
| name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa   | ation "Corp," "Inc," or "Co      | ". A professional corporatio    |  |                 |
| B. Enter new principal office address,   |                                  |                                 |  |                 |
| (Principal office address MUST BE A S  | TREET ADDRESS )                  |                                 |  |                 |
|  |                                  |                                 |  |                 |
|  |                                  |                                 |  |                 |
| C. Enter new mailing address, if appli<br>(Mailing address MAY BE A POST)  |                                  |                                 |  |                 |
| (maning dauress MAT DE ATOST   | OFFICE BOX                       |                                 | ·····                                  |                 |
|  |                                  |                                 | ······································ |                 |
|  |                                  |                                 |  |                 |
| D. If amending the registered agent an   |                                  | s in Florida, enter the name o  | of the                                 |                 |
| new registered agent and/or the new  |                                  |                                 |  | `               |
| Name of New Registered Agent   | LUIS J TORRES                    |                                 |  |                 |
|  | 5214 HARBORSI                    | DE DR                           |  |                 |
|  | (Florida street                  | address)                        |  |                 |
| New Registered Office Address:   | TAMPA                            | , Florida                       | 615-3659                               |                 |
| The first of the control of the cont | (City)                           |                                 | (Zip Code)                             |                 |
|  |                                  |                                 |  |                 |
| Name Danishan and American Colonicates 10  | handa a Daniero de Arro          |                                 |  |                 |
| New Registered Agent's Signature, if c<br>I hereby accept the appointment as regist  |                                  | h and accept the obligations of | f the position.                        |                 |
| 1/2  | eas for                          |                                 | -                                      |                 |

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)

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 <math>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.

| Example:<br>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> | Name                                    | <u>Addres</u> s                        |  |
| 1) Change                  | <u>V</u>     | LUIS J TORRES                           | 5214 HARBORSIDE DR                     |  |
| X Add                      |              |   | Tampa, FL 33615-3659                   |  |
| Remove                     |              |   | •                                      |  |
| 2) Change                  | V            | ERIC CAQUIAS                            | 6584 SHEPARD OAKS PASS                 |  |
| Add                        |              |   | LAKELAND, FL 33811                     |  |
| X Remove                   |              |   |  |  |
| 3) Change                  |              |   |  |  |
| Add                        |              |   |  |  |
| Remove                     |              |   | •                                      |  |
| 4) Change                  |              | end to add this local annual and a sure |  |  |
| Add                        |              |   |  |  |
| Remove                     |              |   | No.                                    |  |
| 5) Change                  |              |   |  |  |
| Add                        |              |   |  |  |
| Remove                     |              |   |  |  |
| 6) Change                  |              |   |  |  |
| Add                        |              |   | . #################################### |  |
| Remove                     |              |   |  |  |

| Trach additional sk | ing additional Articles, of necessary). (Be       | enter change(s) here<br>specific)     | <b>;</b>                                      |                                       |
|---------------------|---|---------------------------------------|---|---------------------------------------|
| шасн аааннопан SN   | eeus, y necessuryj. (De                           | specific)                             |   | <i>/</i> '                            |
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| rovisions for imp   | rovides for an exchange,<br>lementing the amendme | nt if not contained in                | cancenation or issued<br>n the amendment itse | snares.<br>lf:                        |
| (if not applicat    | ble, indicate N/A)                                |                                       |   | <del></del>                           |
|                     |   | /                                     |   |                                       |
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|                     | 6111  |                                       |   |                                       |
| -                   | -NA/  |                                       |   |                                       |
|                     | MA  |                                       |   |                                       |

| The date of each amendment(s)                              | adoption: 11/01/2014   |
|--|--|
| Effective date if applicable:                              | 1/01/2014  |
| <u> </u>   | (no more than 90 days after amendment file date)   |
| Adoption of Amendment(s)                                   | (CHECK ONE)  |
| ■ The amendment(s) was/were a by the shareholders was/were | adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.  |
|  | approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s): |
| "The number of votes ca                                    | ast for the amendment(s) was/were sufficient for approval  |
| by   | (voting group)   |
|  | (voting group)   |
| ☐ The amendment(s) was/were a action was not required.     | adopted by the board of directors without shareholder action and shareholder   |
| ☐ The amendment(s) was/were a action was not required.     | adopted by the incorporators without shareholder action and shareholder  |
| Dated /  | november 7, 2014   |
| Signature  | in Obalina   |
|  | a director, president or other officer – if directors or officers have not been  |
| selec  | cted, by an incorporator - if in the hands of a receiver, trustee, or other court  |
| арро   | pinted fiduciary by that fiduciary)  |
|  | ANGEL DE LA ROSA   |
|  | (Typed or printed name of person signing)  |
|  | PRESIDENT  |
|  | (Title of person signing)  |