# P11000054963

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# **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: CHILL FACTOR CORP.						
DOCUMENT NUMBER: P11 0000 54963						
The enclosed Articles of Amendment and fee are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
MAR CO A. TROYA (Name of Contact Person)						
CHILL FACTOR CORP.						
7547 NW 70 ST						
MIAMI FL 33166						
in foe chillfactorfl. com						
E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:						
MARCO TROYA at 786 245 1120						
(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 \$\Bigcup \\$43.75 Filing Fee \& \Bigcup \\$43.75 Filing Fee \& \Certificate of Status \\ (Additional copy is enclosed) \Bigcup (Additional Copy is Enclosed) \Bigcup \Binclum \Bigcup \Bigcup \Bigcup \Bigcup \Bigcup \Bigcup \Bigcup \Bi						

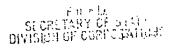
# **Mailing Address**

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 to Articles of Incorporation of



of 15 DEC - 1 PM 2: 22

CHILL FACTOR CORP	13 050 1 111 2 22
(Name of Corporation	as currently filed with the Florida Dept. of State)
P11000054963	
(Documen	nt Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Stits Articles of Incorporation:	tatutes, this Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corp	oration:
	The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the ab	"corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRI</u>	<u>ESS</u> )
C. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )	
•	
D. If amending the registered agent and/or registered new registered agent and/or the new registered off	
	ince address.
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
Name Danistanus d'America Simuntena i Calemania a Danista	and Area.
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I a	n familiar with and accept the obligations of the position.
	. , , .
Signatu	ure 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 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: X.Change X. Remove X. Add	PT John D V Mike J SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) Change Add Remove	Officer	WALTER, MONTOYA	18019 NW 41 PLACE MIAMI GARDENS FL 33055
2) Change Add	P	WALTER MONTOYA	7547 NW 70 ST MIAMI FL 33166
Remove 3) Change Add	<u>VP</u>	ERNESTO MARRERO	15421 SW 81 CIRCLE LANE #29 MIAM FL 33193
Remove 4) Change Add Remove	<del></del>		
5) Change Add Remove			
6) Change Add Remove	<del></del>		

Attach <i>addition</i>	r adding additional nal sheets, if necessa	ry). (Be specific)	1			
				<del></del>		<del></del>
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						<u> </u>
provisions for	ent provides for an	amendment if not	ification, or canc	ellation of issued	<u>l shares,</u> elf:	
(if not app	plicable, indicate N/A	1)			_	
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	date of each amen this document was	dment(s) adoption: signed.	10/2	20/2015	SERSE TRUE OF STATE O
Effe	ective date <u>if applic</u>		a maya thay 00 daya	ifter amendment file dat	15 DEC -   PM 2: 22
		(n	o more inan 90 aays a	ijier amenameni jiie aai	2)
		ed in this block does in the on the Department	* *	e statutory filing require	ments, this date will not be listed as the
Ada	ption of Amendme	ent(s) (g	CHECK ONE)		
X	The amendment(s) was/were sufficien		the members and the	number of votes cast fo	r the amendment(s)
	There are no membadopted by the box		led to vote on the ame	ndment(s). The amendr	nent(s) was/were
	Dated	10/2	0/2015		
	Signature		44		
	- '	have not been selecte		oard, president or other of — if in the hands of a reduciary)	
			MARCO	A. TROY	<b></b>
		<del>-</del>	(Typed or print	ed name of person signi	ng)
				SSIDE JT	