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. (Re	questor's Name)	
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(Cit	y/State/Zip/Phone	e #)
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MAY 1 5 2014 C. CARROTHERS

COVER LETTER

TO: Amendment Section

Division of Corporations		
NAME OF CORPORATION: 200 Nic DOCUMENT NUMBER: 20000	K Air Conditioning Inc	
The enclosed Articles of Amendment and fee are sub	omitted for filing.	
Please return all correspondence concerning this matt	ter to the following:	
Oguena Ja Obol Nick Hii	Name of Contact Person Conditioning Inc Firm/Company	
4816 Posei	don Place	
Lake Worth	Address 33463	
,	City/ State and Zip Code	
CODINICKAIR 2012 @ E-mail address: (to be use	o att. net ed for future annual report notification)	
,	•	
For further information concerning this matter, please	e call:	
Ogyena Jacquet	at (561) 644 2490	
Name of Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount made p	ayable 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	Amendment Section	
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation	
Cool Nick Air Conditioning.	Inc
(Name of Corporation as currently filed with	the Florida Dept. of State)
P120000 65762	
(Document Number of Corporation	n (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Proj</i> its Articles of Incorporation:	fit Corporation adopts the following amendment (s) to
A. If amending name, enter the new name of the corporation:	A SR The new men
name must be distinguishable and contain the word "corporation," "compa" "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A proword "chartered," "professional association," or the abbreviation "P.A."	ny," or "incorporated" or the abbreviation of fessional corporation name must comfain the property of the contains th
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)) / A
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office address in Flori new registered agent and/or the new registered office address:	da, enter the name of the
Name of New Registered Agent	
(Florida street address)	
New Registered Office Address:	. Florida
(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 acc	ept the obligations of the position.
Signature of New Registered As	gent, 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	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name C. II	Address
1)Change	\mathcal{D}	Gerard Gilks	11065 51st Court North
Add			W Palm Sch HL 33411
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			·
Add			
Remove			
б) Change		_ ·	
Add			
Remove			

If amending o (Attach addition	r adding additional Articles, enter change(s) here: nal sheets, if necessary). (Be specific)	
	\sim 11	
	MITH	
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· -		
<u></u>		
-		
<u>provisions for</u>	ent provides for an exchange, reclassification, or cancellation of implementing the amendment if not contained in the amendment if not contained in the amendment if indicate N/A)	of issued shares, nent itself:
	n/H	
		·

The date of each amendment(s) adoption: May 1, 2015, if other than the date this document was signed. Effective date if applicable:, and when the date if applicable in more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
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)
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 May 9, 2015
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)
Nixon Jacquet
(Typed or printed name of person signing)
(Title of person signing)