13000055392

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: _	CENTRAL	FLORIDA AC AND DIS	TRIBUTION, INC.			
DOCUMENT NUMBER:		P13000055392				
The enclosed Articles of Amendm		bmitted for filing.				
Please return all correspondence co	oncerning this ma	tter to the following:				
		LORENZO FERNANDE	ZZ			
	Name of Contact Person					
		Firm/ Company				
	4060 BARBARA AVE					
		Address				
		HAINES CITY, FL 338	44			
		City/ State and Zip Cod	e			
	E	XPERTAX@HO)`MAIL.C	СОМ			
E-mail	address: (to be u	sed for future annual report	notification)			
For further information concerning	this matter, plea	se call:	•			
LORENZO FERNANDEZ		at (321	682-1416			
Name of Contact P	erson	Area Co	de & Daytime Telephone Number			
Enclosed is a check for the following	ng amount made	payable to the Florida Depa	artment of State:			
	75 Filing Fee & ficate of Status	□\$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		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle				

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

CENTRAL FLORIDA A/C & DISTRIBUTION, INC.

	RIDA A/C & DISTRIBUTION, INC.
(Name of Corporation :	as currently filed with the Florida Dept. of State)
	P13000655392
(Document	t Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida State Articles of Incorporation:	satutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corpo	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 abb	"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 ADDRE</u>	
C. Enter new mailing address, if applicable:	Signature of the second of the
(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 offi	
new registered agent and/or the new registered offi	ice address:
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registe	and America
	ered Agent: m familiar with and accept the obligations of the position.
· · · · · · · · · · · · · · · · · · ·	
Signatui	re 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	<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>	<u>Name</u>	<u>Addres</u> s			
1) X Change	Р	LORENZO FERNANDEZ	4060 BARBARA AVE			
Add			HAINES CITY, FL 33844			
Remove						
2) Change	Р	LAURA RIO	4060 BARBARA AVE			
Add			HAINES CITY, FL 33844			
X Remove						
3) Change	VP	BENJAMIN NOGUERAS	4060 BARBARA AVE			
Add			HAINES CITY, FL 33844			
Remove						
4) Change						
Add						
Remove						
5) Change						
Add						
Remove						
6) Change						
Add						
Remove						

	nal sheets, if neces:	sary). (Be	specific)				
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an amendme	ent provides for a	n exchange e amendme	, reclassificati	on, or cancellati	on of issued sha	res,	
<u>provisions for</u>	rimplementing th	e amendme	, reclassificati nt if not conta	on, or cancellati	on of issued sha ndment itself:	res,	
<u>rovisions for</u>	ent provides for a r implementing th plicable, indicate N	e amendme	, reclassificati nt if not conta	on, or cancellati nined in the ame	on of issued sha ndment itself:	res,	
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<u>provisions for</u>	rimplementing th	e amendme	, reclassificati	on, or cancellationed in the ame	on of issued sha ndment itself:	res,	

	. JUNE 02, 2016	
The date of each amendment(s) a	doption:	, if other than the
date this document was signed.		
Effective date if applicable:	JUNE 02, 2016	
<u></u>	(no more than 90 deys after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	block does not meet the applicable statutory filing requirements, this date epartment of State's records.	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.	
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not required.	opted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
Dated	JUNE 02, 2016	
Signature	Laura Rios	
(By a d selecte	irector, president or other officer if directors or officers have not been d, by an incorporator if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	
	LAURA RIO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	