Division of Corporations Electronic Filing Cover Sheet

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(((H16000125842 3)))



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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062

: (323)962-8600

Phone Fax Number

: (323)962-3889

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:			
CIDATI	AUUITESS.			

COR AMND/RESTATE/CORRECT OR O/D RESIGN KRYOSEC, INC.

Certificate of Status	0
Certified Copy	1
Page Count	06
Estimated Charge	\$43.75

Electronic Filing Menu

Corporate Filing Menu

Help 2 3 2016

DOCUMENT NUMBER:

COVER LETTER

Division of Corporations	
NAME OF CORPORATION:	KRYOSEC, INC.

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following

Cheyenne Moseley	
Name of Contact F	erson .
.egalZoom.com, Inc.	
Firm/ Compan	ру
101 N. Brand Blvd., 11th Floor	
Address	
Glendale, CA 91203	
City/ State and Zip	Code

 Cheyenne Moseley
 at (
 800
 773-0888 ext. 9724

 Name of Contact Person
 Area Code & Daytime Telephone Number

E-mail address: (to be used for future annual report notification)

Enclosed is a check for the following amount made payable to the Florida Department of State:

□ \$35 Filing Fee □\$43.75 Filing Fee & □\$43. Certificate of Status Cert

For further information concerning this matter, please call:

\$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			7
	Articles of Incorporation			6
	of			
	KRYOSEC, INC.	•		_ 🛜
(Name of Corporation as curre	ntly filed with the Florida Dept.	of State)		0
	P14000074738			
(Document Num	ber of Corporation (if known)			_ ;
rsuant to the provisions of section 607.1006, F Articles of Incorporation:	Florida Statutes, this Florida Prof.	It Corporation adop	ots the following	ng amend
. If amending name, enter the new name of	the corporation:			
KRYOSEC INC.				The n
				_
Principal office address <u>MUST BE A STREE</u> . Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFIC</u>	CE BOX)	a, enter the name	of the	
Principal office address MUST BE A STREET Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE) If amending the registered agent and/or re	CE BOX)	a, enter the name	of the	
. If amending the registered agent and/or re new registered agent and/or the new regis	CE BOX)	a, enter the name	of the	- - - -
Principal office address MUST BE A STREET . Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC . If amending the registered agent and/or repew registered agent and/or the new regis	CE BOX) calstered office address in Florid tered office address:	la, enter the name o	of the	

Mike Jones, V as Remove, and Sally Smith, SV as an Add.

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.

Example: X Change PT John Doe X Remove V Mike Jones X Add <u>sv</u> Sally Smith Address Type of Action Title Name (Check One) D **BRIAN ATHERTON** 6598 MONTEREY POINT 1) ____ Change NAPLES, FL 34105 Add Remove Change ____ Add _ Remove 3) ___ Change ____ Add ____ Remove 4) ____ Change __ Add __ Remove 5) ____ Change ____ Add __ Remove 6) ____ Change _ Add __ Remove

(Title of person signing)