## P150000 20540

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORA	TION: ARCTIC CONDI	TION AIR INC		
DOCUMENT NUMBE	R: P15000020560			
	Amendment and fee are su	bmitted for filing.		
Please return all correspo	ondence concerning this ma	tter to the following:		
AI	NTONIO A HUERTA			
<del></del>		Name of Contact Person	1	
AI	RCTIC CONDITION AIR	INC		
_		Firm/ Company		
22	236 48TH ST SW			
		Address		
N	APLES FL 34116			
		City/ State and Zip Cod	e	
CGPSS	ERVICES@AOL.COM			
	E-mail address: (to be us	sed for future annual report	notification)	
For further information c	oncerning this matter, pleas	se call:		
ANTONIO A HUERTA		at ( <u> </u>	de & Daytime Telephone Number	
Name of (	Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for the	ne following amount made	payable to the Florida Depa	artment of State:	
S35 Filing Fee	□\$43.75 Filing Fee & Certificate 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

## FILED

2018 AUG 14 PM 1: 28

ARCTIC CONDITION AIR INC (Name of Corporation as currently filed with the Florida Dept. of State) ETARY OF STATE P15000020560 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 2236 48TH ST SW B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) NAPLES FL 34116 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 Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: \_ (Citv) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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 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 Do	<u>e</u>			
X Remove	<u>V</u>	Mike Jo	nes			
X Add	<u>sv</u>	Sally Sn	<u>rith</u>			
Type of Action (Check One)	<u>Title</u>		Name			Address
1) Change	VP		MARCOS	DIVAC	BETANCOUR	ና 2236 48TH ST SW
X Add						NAPLES FL 34116
Remove						
2) Change		_				
Add						
Remove						
3 ) Change						
Add						
Remove						
4) Change		_				
Add						
Remove						
5) Change		_				
Add						
Remove						<u> </u>
6) Change		_				
Add						
Remove						

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
PLEASE ADD MACOS D BETANCOURT . (VICEPRESIDENT)
THANK YOU
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)
<del></del>
<del></del>

	08/09/2018	
The date of each amendment(s	adoption:	, if other than the
date this document was signed.	0/00/0040	
Effective date if applicable:	8/09/2018	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	s block does not meet the applicable statutory filing requirements, this Department of State's records.	date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment sufficient for approval.	n(s)
	approved by the shareholders through voting groups. The following state for each voting group entitled to vote separately on the amendment(s):	rment
"The number of votes c	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareho	lder
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
08/09/2	018	
Dated		
	(A) Would	
Signature	a director, president or other officer – if directors or officers have not been	<del></del>
	a director, president or other officer – if directors or officers have not becomes different or other contents are incorporator – if in the hands of a receiver, trustee, or other contents are incorporated.	
app	pinted fiduciary by that fiduciary)	<b>,,,,</b>
	ANTONIO A HUERTA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	