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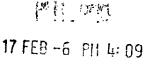
COVER LETTER

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TO: Amendment Section Division of Corporations

NAME OF CORPO	PRATION: 1-800 COLD AIR	INC	
DOCUMENT NUM	D17000010060	,	
The enclosed Article	s of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this man	tter to the following:	
	FELICIA TAVOLACCI		
	1-800 COLD AIR INC	Name of Contact Person	
		Firm/ Company	
	6710 EAGLE TREE COURT	• •	
		Address	
. ".	FORT MYERS FL 33917		
· .		City/ State and Zip Code	
180	Ocoldair@gmail.com		
	-	sed for future annual report	notification)
For further informati	on concerning this matter, pleas	se call:	
FELICIA TAVOLACCI		at (239	218-1356
Name of Contact Person		Area Coo	de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	rtment of State:
□ \$35 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)
At Di P.	ailing Address mendment Section vision of Corporations O. Box 6327 dlahassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ussee, FL 32301

Articles of Amendment to Articles of Incorporation of



1-800 COLD AIR INC (Name of Corporation as currently filed with the Florida Dept. of State) P17000010069 (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." B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>) 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: FELICIA TAVOLACCI Name of New Registered Agent 6710 EAGLE TREE COURT (Florida street address) FORT MYERS New Registered Office Address: (City) 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.

X.Change	PT	John Doe	
X Remove	<u>V</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	P	STEVEN BETANCOURT	6710 EAGLE TREE COURT
Add			FORT MYERS, FL 33917
X Remove			
2) Change	P	FELICIA TAVOLACCI	6710 EAGLE TREE COURT
X Add			FORT MYERS, FL 33917
Remove			
3) Change			
Add			·
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6)Change			
Add			
Remove			

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)	E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)				
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)	N/A				
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(if not applicable, indicate N/A)	provisions for implementing the amendment if not contained in the amendment itself:				
N/A	(if not applicable, indicate N/A)				
	N/A				
	\cdot				

	01/03/2017	
The date of each amendment date this document was signed.		, if other than the
27.004/1-41011 61	01/03/2017	
Effective date if applicable:	(no more than 90 days after amendment file date)	<u></u>
	this block does not meet the applicable statutory filing requirements, this date veries the Department of State's records.	vill not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement d 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)	
	(voting group)	
☐ The amendment(s) was/wer action was not required.	re adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder	
01/03/	2017	
Dated	100	
Signature	telii lali	
Signature(B	by a director, president or other officer - if directors or officers have not been	
se	elected, by an incorporator - if in the hands of a receiver, trustee, or other court	
ар	opointed fiduciary by that fiduciary)	
	FELICIA TAVOLACCI	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	