## P100010069

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: 1-800 Cold Air Inc	: 		
DOCUMENT NUM	DIZOMATIAAG			
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.		
Please return all corre	spondence concerning this ma	atter to the following:		
	Anthony Tavolacci			
		Name of Contact Person	n	
	1-800 Cold Air Inc			
		Firm/ Company		
	1285 Cypress Ave			
		Address		
	Melbourne, Florida 32935			
		City/ State and Zip Cod	e	
1800	coldair@gmail.com			
	E-mail address: (to be u	sed for future annual report	notification)	
For further information	n concerning this matter, plea	se call:		
Anthony Tavolacci		at ( 321	848-1020	
Name of Contact Person			de & Daytime Telephone Number	
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:	
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 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

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 MUST BE A STREET ADDRESS ) 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: (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 accept the obligations of the 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 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) Change	Р	Felicia Tavolacci	6710 EAGLE TREE COURT
Add			Fort Myers Fl 33917
X Remove			
2) Change	D	Aaron Stancadi	2055 Sykes Creek Dr
Add			Merritt Island Fl 32953
X Remove			
3 ) Change		_	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		<del>-</del>	<del></del>
Add			<del></del>
Remove			
6) Change			
Add			
Remove			

, y	ditional <u>Artic</u> necessary).	(Be specific)				
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					<del></del>	
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f an amendment provides	s for an excha	nge, reclassifi	ication, or ca	ncellation of is	sued shares,	
provisions for implement (if not applicable, indi	ing the amend	dment if not c	ontained in t	<u>he amendmen</u>	t itself:	
(3,, 1,4,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,						
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				<del></del>		

	01/02/2018	
The date of each amendmen date this document was signed		, if other than the
Effective date if applicable:	01/02/2018	
estective date <u>ii appreame</u> .	(no more than 90 days after amendment)	file date)
Note: If the date inserted in document's effective date on t	this block does not meet the applicable statutory filing require Department of State's records.	uirements, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The number of votes cast for ere sufficient for approval.	the amendment(s)
☐ The amendment(s) was/we must be separately provide	re approved by the shareholders through voting groups. The add for each voting group entitled to vote separately on the an	following statement nendment(s):
"The number of vote:	cast for the amendment(s) was/were sufficient for approval	
bv		
·	(voting group)	
☐ The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action	on and shareholder
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action ar	nd shareholder
01/02 Dated Signature	anthony lake.	
	y a director, president or other officer - if directors or office	
	lected, by an incorporator – if in the hands of a receiver, trus pointed fiduciary by that fiduciary)	stee, or other court
••1	•	
	Anthony Tavolaeci	
	(Typed or printed name of person signing)	
	Secretary	
	(Title of person signing)	