P18000059244

(Requestor's Name)	
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(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
	11/09/2001008023
(Document Number)	2020
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: OTO REFRIGERA	CION COMPANIA ANON	NIMA CORP
DOCUMENT NUME			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	JOHNNY J FRASSINO		
	()	Jame of Contact Person	
	581 SE 34 TERR	Firm/ Company	
		Address	
	HOMESTEAD, FL 33033		
		City/ State and Zip Code	2
	n concerning this matter, pleas		
JOHNNY J FRASSIN		at (_) 799-7132
Name o	of Contact Person	Area Coo	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio The Co 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

Articles of Amendment Articles of Incorporation of

(Name of Corporation as co	urrently filed with the Flor	ida Dept. of State)
P18000059244		
(Document Nu	mber of Corporation (if known	wn)
Pursuant to the provisions of section 607,1006, Florida Statuto its Articles of Incorporation:	es, this <i>Florida Profit Corpo</i>	eration adopts the following amendment(s) t
A. If amending name, enter the new name of the corporat	tion:	
N/A		The new
name must be distinguishable and contain the word "corporate "Inc.," or Co.," or the designation "Corp," "Inc.," or "Corparate and association," or the abbreviation	Co". A professional corpo	porated" or the abbreviation "Corp.," oration name must contain the word
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	رم
C. Enter new mailing address, if applicable:		
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		
	<u> </u>	77. 55
		ts ô.
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office a Name of New Registered Agent		r the name of the
	· Land Alice	
tra	orida street address)	
New Registered Office Address:	(City)	, Florida(Zip Code)
	(Chy)	(III)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa	l Agent: miliar with and accept the o	bligations of the position.
	_	

[□] The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	TATY A PALOMARES	581 SE 34 TER
Add			HOMESTEAD, FL 33033
X Remove			
2) Change	VP	CARMEN FRASSINO CADENAS	8871 FONTAINEBLEAU BLVD U
X Add			MIAMI, FL 33172
Remove 3) Change	VP	SERAFINO FRASSINO	8871 FONTAINEBLEAU BLVD I
X Add			MIAMI, FL 33172
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary	d Articles, enter chang any) (Re specific)	<u>ge(s) nere</u> :		
/A	my, (be specific)			
			· · · · · · · · · · · · · · · · · · ·	
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18-3				
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If an amendment provides for a	n exchange, reclassifice amendment if not co	cation, or cancellation ontained in the amenc	of issued shares, lment itself:	
(if not applicable, indicate N				

The date of each amendment(s) adopti-	10/03/2020	, if other than th
date this document was signed.	VII	if other than th
10/05/202	20	
Effective date if applicable:	· ·	
-	(no more than 90 days after amendment file	date)
Note: If the date inserted in this block document's effective date on the Department.	does not meet the applicable statutory filing requirement of State's records.	ements, this date will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were adopted action was not required.	by the incorporators, or board of directors without sl	nareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient	by the shareholders. The number of votes east for the ent for approval.	ne amendment(s)
	d by the shareholders through voting groups. The for voting group entitled to vote separately on the amen	
"The number of votes cast for th	ne amendment(s) was/were sufficient for approval	
bv	<u>,</u> "	
	(voting group)	
Dated	25-2020	
Signature		
	or, president or other officer - if directors or officers	
11. •	an incorporator – if in the hands of a receiver, truste	e, or other court
appointed fi	duciary by that fiduciary)	
JHO	NNY FRASSINO	
	(Typed or printed name of person signing)	
PRE	SIDENT	
	(Title of person signing)	