P18000099469

(Re	questor's Name)	
(AdA	dress)	
(Add	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: NELSON C.M. IN	C	
DOCUMENT NUME		··	
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	NELSON CASTRO		
		Name of Contact Persor	1
		Firm/ Company	
	23173 SW 104TH PLACE		
	MIAMI, FL 33190	Address	
	WIAMI, 1 C 33170	City/ State and Zip Code	
	STRATAGEMKINGSSOLU		-
		sed for future annual report	notification)
	n concerning this matter, pleas		
NELSON CASTRO		at (
	of Contact Person r the following amount made		de & Daytime Telephone Number
S35 Filing Fee	☐ 543.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Contined 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	Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	

Articles of Amendment to Articles of Incorporation of



NELSON C.M. INC.

(<u>Name</u>	of Corporation as curren	tly filed with the Florida Dept. of State)	
P18000099609			
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607, its Articles of Incorporation:	.1006, Florida Statutes, this	s Florida Profit Corporation adopts the following amendment(s) to	
A. If amending name, enter the new n	ame of the corporation:		
COLD CONCEPTS OF FLORIDA INC		The new	
	Corp, " "Inc," or "Co".	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		23173 SW 104TH PLACE	
		MIAMI, FL 33190	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		23173 SW 104TH PLACE	
		MIAMI, FL 33190	
D. If amending the registered agent at new registered agent and/or the ne			
Name of New Registered Agent	NELSON CASTRO		
<u>Name of New Registered Agent</u>	23173 SW 104TH PLAC	E.	
	· · · · · · · · · · · · · · · · · · ·	trect address)	
New Registered Office Addiess:	MIAMI	Florida 33190	
wew negotered Office Address.		(City) (Zip Code)	
New Registered Agent's Signature, if of thereby accept the appointment as registered.		nt: with and accept the obligations of the position.	
	Tall	W	
	Signature of New	Registered Agent, if changing	

Check if applicable

■ 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.

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	V	NOWELL SALGUEIRO	15391 SW 23RD LANE
X Add			MIAMI, FL 33185
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			·
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	icles, enter change(s) he (Be specific)	- -		
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*****		, , , , , , , , , , , , , , , , , , , ,		
				
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			<u> </u>	
f an amendment provides for an excl provisions for implementing the ame	nange, reclassification,	or cancellation of is d in the amendmen	isued shares,	
(if not applicable, indicate N/A)	manicus ir itos Containe	o in the amendmen	X 24.7C12.	
			-	
				_

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09/15/2020	
The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
09/15/2020	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this document's effective date on the Department of State's records.	date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action was not required.	tion and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	nt(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following state must be separately provided for each voting group entitled to vote separately on the amendment(s):	ment
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
(voting group)	
09/15/2020	
DatedSignature	
(By a director, president or other officer – if directors or officers have not bee	 n
selected, by an incorporator - if in the hands of a receiver, trustee, or other co	
appointed fiduciary by that fiduciary)	
NELSON CASTRO	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	