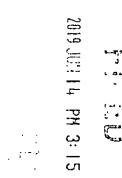
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Office Use Only



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R. WHITE JUN 24 2019

COVER LETTER

TO: Amendment Section

Tallahassee, FL 32314

Division of Corporations
NAME OF CORPORATION: COOL Nick Air Conditioning Inc DOCUMENT NUMBER: 19000028116
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Oguena Jacquet Name of Contact Person Cool Nick Air Conditioning Inc Firm/ Company 4816 Poseidon Place Lake Worth, FL 33463 City/ State and Zip Code Coolnickair 2012 @att. net E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Oguera Jacquet at (56) 644-2490 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

At ticles of A	13
to Articles of Inc	
Cool Nick Air Condition	oning2019 TUHICPH 3: 15
(Name of Corporation as current)	ly filed with the Florida Dept. of State)
19000028116	
(Document Number o	f Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(
A. If amending name, enter the new name of the corporation:	
n n	and a
name must be distinguishable and contain the word "corporatio	The new
"Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	10
	0
C. Enter new mailing address if applicables	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	\
	<u> </u>
	•
D. If amending the registered agent and/or registered office add	
new registered agent and/or the new registered office address	Ť _
Name of New Registered Agent	14
	1
(Florida st	reet address)
·	
New Registered Office Address:	Florida
	(City) (Zip Code)
N D	
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	
. , , , , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , , ,
~ 1	
11100	
Signature of New I	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) 1) Change	Title D	Gerard D. Gilles	10811 NW 35th Place
Add			Sunrise FL 33351
2) Change Add			
Remove 3) Change Add			1
Remove 4) Change Add			
Remove 5) Change Add			
6) Change Add Remove			
Kemove			

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
	$ \frac{1}{\sqrt{1}}$ $\frac{1}{\sqrt{1}}$ \frac
f an amandment provides for an aval	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
	$ \lambda$ λ
	
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	1/10-
	7/10-
	7/10

The date of each amendment(s) adoption: JUNE 1, 2019, if other than t
Effective date if applicable: June 1, 2019
(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 date will not be listed as a locument's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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)
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated_June 11,2019
Signature
(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
Nixon Jacquet
(Typed or printed name of person signing)
Presidents

(Title of person signing)