P190000 66649

| (Re | equestor's Name) | · |
|-------------------------|--------------------|------------------|
| (Ad | dress) | |
| (Ad | dress) | |
| (Cit | ty/State/Zip/Phone | : #) |
| PICK-UP | MAIT | MAIL |
| (Bu | siness Entity Nan | ne) |
| (Do | ocument Number) | _ |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
| | | |
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Office Use Only



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COVER LETTER

| TO: Amendment Sect Division of Corpo | = | | |
|---|--|--|--|
| NAME OF CORPORATION: Prestige Cooling Systems Inc. | | | |
| DOCUMENT NUMI | BER: <u>Y190</u> | 00066649 | _ |
| The enclosed Articles | of Amendment and fee are su | bmitted for filing. | |
| Please return all corres | spondence concerning this ma | tter to the following: | |
| | Mar | Name of Contact Person | ۷ |
| Yrestae Cooling Systems, Inc. | | | |
| | 37922 Av | ora Aux | |
| | 70 dour chills | Address 329 | 541 |
| | se transition | S FL 339 City/ State and Zip Code | |
| E-mail address! (to be used for future annual report notification) | | | |
| For further information | n concerning this matter, pleas | se call: | |
| Maria | Gongler | at (<u>913</u> | , 403-3402 |
| Name (| of Contact Person | Area Coo | le & Daytime Telephone Number |
| Enclosed is a check for the following amount made payable to the Florida Department of State: | | | |
| \$35 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) |
| | ling Address | Street / | <u>Address</u> |
| Amendment Section | | Amenda | nent Section |
| Division of Corporations | | | n of Corporations |
| | P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 | | |
| 1 3111 | anassee, i il Jajim | 2412 IN | . MOHOU SHEEL, SHIE & IV |

Tallahassee, FL 32303

Articles of Amendment to

Articles of Incorporation

| Prestige Cooling Sys | stems Inc. | |
|--|--|-----------------------|
| | filed with the Florida Dept. of State) | |
| P19000066649 | | |
| (Document Number of C | Corporation (if known) | |
| Pursuant to the provisions of section 687.1886, Plorida Statutes, this Fits Articles of Incorporation; | darida Profit Corporation adopts the following amend | dment(s) to |
| A. If amending name, enter the new name of the corporation: | | |
| | The | пен |
| name must be distinguishable and contain the word "corporation," "co "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A." | mpany," or "incorporated" or the abbreviation "Corporation name must contain 👺 w | P.J. Pord The |
| | APP | 주요 교육 |
| B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>) | | _뮤ુ |
| , | 6 | - 원취교 항 됐 症 |
| | P == | F41 |
| | . | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | 2 | ÷ |
| | | _ |
| | - | _ |
| | | _ |
| D. If amending the registered agent and/or registered office address: | ss in Florida, enter the name of the | |
| Name of New Registered Agent | | |
| | | |
| (Florida stree | t address) | |
| New Registered Office Address: | , Florida | |
| ((| ity) (Zip Code) | |
| | | |
| New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wi | th and accept the obligations of the position. | |
| | | |
| Signature of New Reg | ristered 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: <u>X</u> Change | Grandot T9 | <u>oe</u> | |
|-----------------------------|-------------------------|----------------------------------|----------------------|
| X Remove | <u>V</u> <u>Mike Jo</u> | ones | |
| X Add | SV Sally S | <u>mith</u> | |
| Type of Action (Check One) | Title | <u>Name</u> | <u>Addres</u> s |
| 1) Change | 52 | Carlos A. Consalez Mareno 50% | 7144 Boyette Rd |
| Add | | 50% | Westery Chapel FC |
| Remove 2) | <u> </u> | Saul Goozalez Murrero | 37922 hora Ave |
| Add | | 40% | Zephychils FL 33541 |
| Remove 3) Change | <u>15</u> | Maria D. Consalez | 37922 Axxa Axe |
| _ X _ Add | | (0% | Zephychills FC 335f1 |
| Remove 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| E. If amending or adding additional Articles, enter change(s) he (Attach additional sheets, if necessary). (Be specific) | <u>ere</u> : | | |
|--|---------------|---------------------------------------|-----------|
| Partnership as follows: | | | |
| Carlos A. Conzakz Maria | · ^ - | 50% | |
| -Saul Consider Marrens | | 40% | |
| - Maria D. Consalez - | <u>-</u> | 10% | |
| | | | |
| | | | |
| | <u> </u> | | |
| | <u> </u> | · · · · · · · · · · · · · · · · · · · | |
| | | | |
| | | | |
| F. If an amendment provides for an exchange, reclassification, | or cancellati | on of issued share: | 35 |
| provisions for implementing the amendment if not containe (if not applicable, indicate N/A) | | | _ |
| Carlos A. Gonzakz Warren | | 50% | owneship |
| Saul Gonzalez Marren | - | 40% | anership |
| Mara D. Somalez | | 10% | ownership |
| | | | |
| | | | |
| | | | |

| The date of each amendment(s) acd this document was signed. | loption: | , if other than the |
|--|---|---|
| Effective date if applicable: | 4-2-2020 | |
| | (no more than 90 days after amendment file | date) |
| Note: If the date inserted in this b document's effective date on the De | lock does not meet the applicable statutory filing require partment of State's records. | ements, this date will not be listed as the |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) | |
| LThe amendment(s) was/were add action was not required. | pted by the incorporators, or board of directors without sh | hareholder action and shareholder |
| ☐ The amendment(s) was/were ado by the shareholders was/were su | pted by the shareholders. The number of votes cast for the flicient for approval. | ne amendment(s) |
| | proved by the shareholders through voting groups. The followed by the shareholders through voting group entitled to vote separately on the amen | |
| "The number of votes cast | for the amendment(s) was/were sufficient for approval | |
| by | (voting group) | |
| | (voting group) | |
| Signature (By a di | rector, president or other officer – if directors or officers d, by an incorporator – if in the hands of a receiver, truster | |
| арропп | ed fiduciary by that fiduciary) | |
| | (Typed or printed name of person signing) | ruew |
| | Vice President | |
| | (Title of person signing) | |