## M

## P24000058369

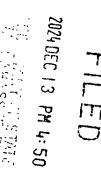
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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: REFRICENTER K	ISSIMMEE, INC.	<u>_</u>	
DOCUMENT NUMI	BER: P24000058369			
	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	Gustavo Gutierrez			
		Name of Contact Persor	1	
	Gutierrez, & Gutierrez, P.A.			
		Firm/ Company		
	770 South Dixie Highway, So	, ,		
		Address		
	Coral Gables, Florida 33146			
		City/ State and Zip Code	e	
	gus@gg-lawyers.com			
	E-mail address: (to be us	sed for future annual report	notification)	
For further informatio	n concerning this matter, pleas	se call:		
Gustavo Gutierrez		at (		
Name :	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for	r 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)	☐\$52.50 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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

## Articles of Amendment Articles of Incorporation of

(Name of Corporation as currently filed with	the Florida Dept. of State)
P24000058369	
(Document Number of Corporation	ı (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Prof</i> its Articles of Incorporation:	fit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the corporation:	
REFRICENTER ORLANDO, INC.	The new
name must be distinguishable and contain the word "corporation," "company," or "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional "chartered," "professional association," or the abbreviation "P.A."	"incorporated" or the abbreviation "Corp.,"
D. Catanana mineral office address if applicables	<b>20</b>
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
	₩ <b>5</b>
<del></del>	77° -0  T
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	<u> </u>
<del></del>	· · · · · · · · · · · · · · · · · · ·
D. If amending the registered agent and/or registered office address in Florid new registered agent and/or the new registered office address:	da, 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:	Florida
(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 acce	ept the obligations of the position.
Signature of New Registered Ag	

☐ 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)

Example:

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>	<u>John Doe</u>				
X Remove	<u>v</u>	Mike Jones				
X Add	<u>sv</u>	Sally Smith				
Type of Action (Check One)	<u>Title</u>	<u>Nan</u>	<u>ne</u>		Address	
1) Change				·		
Add						
Remove						
2) Change			<u>.</u>			
Add						
Remove 3 ) Change		_				
Add						
Remove						
4) Change						
Add						
Remove						
5) Change						
Add						
Remove						
6) Change		_				<u>.</u>
Add						
Remove					<del></del>	

Attach <i>additio</i>	nal sheets, if no	cessary). (Be	enter change(s) specific)				
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<u>f an amendm</u>	<u>ent provides f</u> e	or an exchange	<u>, reclassificatio</u>	n, or cancellati	<u>on of issued sh:</u>	ares,	
<u>provisions fo</u>	<u>r implementin</u>	g the amendme	ent if not <u>contai</u>	ned in the ame	<u>ndment itself:</u>		
(if not ap	plicable, indica	ite N/A)					
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The date of each amendment(s) a date this document was signed.	doption: 12 11 2024	, if other than the
Effective date <u>if applicable</u> :		
<u></u>	(no more than 90 days after amendment fil	e date)
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirepartment of State's records.	rements, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
■ The amendment(s) was/were action was not required.	opted by the incorporators, or board of directors without	shareholder action and shareholder
☐ The amendment(s) was/were ac by the shareholders was/were s	lopted by the shareholders. The number of votes cast for ufficient for approval.	the amendment(s)
	proved by the shareholders through voting groups. The for each voting group entitled to vote separately on the ame	
"The number of votes eas	t for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
December Dated	11. 2024	
Signature	( <del>)///&gt;</del>	
(By a select	director, president of other officer – if directors or officers ed, by an incorporator – if in the hands of a receiver, trust ited fiduciary by that fiduciary)	
	Jose C Hernandez	
	(Typed or printed name of person signing)	1-7
	President	
	(Title of person signing)	