P99000 081 934

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
Signature 4350			

Office Use Only



500334750425

09/70/19--01018--017 **85.00

19 OCT 24 PM 3: 27

SCUME IARY OF STATE VISION OF CORPORATIONS

Sound

OCT 27 2019 D CUSHING

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ACUTEMP AIR C	CONDITIONING AND API	PLIANCE INC			
DOCUMENT NUME	P99000081934 BER:					
The enclosed Articles	of Amendment and fee are su	bmitted for filing.				
Please return all corres	pondence concerning this ma	tter to the following:				
	CHRIS KIRKMAN					
	Name of Contact Person ACUTEMP AIR CONDITIONING AND APPLIANCE INC					
	Firm/ Company					
	4005 SW BRIARBROOK V	VAY				
	PALM CITY, FL 34990	Address				
		City/ State and Zip Code	<u> </u>			
ACU ¹	TEMPSERVICES@GMAIL	.COM				
	-	sed for future annual report	notification)			
For further information	n concerning this matter, pleas	772	800-8371			
Name o	of Contact Person	at (Area Coo	le & Daytime Telephone Number			
Enclosed is a check for	r the following amount made	payable to the Florida Depa	rtment of State:			
S35 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)			
Ame Divi P.O.	ling Address Indiment Section Ission of Corporations Box 6327 Issaece, FL 32314	Amend: Divisio Clifton 2661 E:	Address ment Section n of Corporations Building secutive Center Circle ssee, FL 32301			

19 0CT 24 PH 3: 2:



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 15, 2019

CHRIS KIRKMAN ACUTEMP AIR CONDITIONING AND APPLIANCE 4005 SW BRIARBROOK WAY PALM CITY, FL 34990

SUBJECT: ACUTEMP AIR CONDITIONING AND APPLIANCE, INC.

Ref. Number: P99000081934

We have received your document for ACUTEMP AIR CONDITIONING AND APPLIANCE, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

If the corporation is a <u>PROFIT</u> corporation it must be signed 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.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing Senior Section Administrator

Letter Number: 819A00021269

Articles of Amendment to

Articles of Incorporation

 \mathbf{of}

ACUTEMP AIR CONDITIONING AND APPLIANCE INC

(Name of Corporation as curre	ently filed with the Florida Dept. of State)
P99000081934	
(Document Number	er of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, thits Articles of Incorporation:	his Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corpore "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," o word "chartered," "professional association," or the abbreviation	or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable:	28
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office addr	
Name of New Registered Agent	
(Florida	i street address)
New Registered Office Address:	, Florida
	(Cuy) (Zīp Code)
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am famili	
, ,	
Signature of Ne	w 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 Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	<u>ones</u>	
<u>X</u> Add	<u>sv</u>	Sally Si	nith	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
1) Change	D		NANCY LEAGUE	4005 SW BRIARBROOK WAY
X Add		_		PALM CITY, FL 34990
Remove				
2) Change				
Add		_		
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		_		<u> </u>
Add				
Remove				
6) Change				
Add				
Remove				

	ieets, if necessary).	(Be specific)			
	•				
	•				
<u> </u>				·	····
					
·					
					=
					
			 		
c			. 4!		
ran amendment p	rovides for an exch	ange, reclassing	itton, or cancelli	ition of issued sna	res,
nearizione facione	hementing the ame	nument it not col	ntamed in the ar	nenument usen:	
provisions for imp	ne, marcare way				
provisions for imp (if not applicab					
provisions for imp (if not applicat					
provisions for imp (if not applicat					
provisions for imp (if not applicat					
provisions for imp (if not applicat			· · · · · ·		
provisions for imp (if not applicat					
provisions for imp (if not applical					
provisions for imp (if not applical					
provisions for imp (if not applical					
provisions for imp (if not applical					
provisions for imp (if not applical					
provisions for imp					
provisions for imp (if not applical					
provisions for imp (if not applicab					

	_, if other than the
date this document was signed.	
Effective date if applicable: (no more than 90 days after amendment file date)	
(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 redocument's effective date on the Department of State's records.	not be listed as the
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.	
SEPTEMPER 26, 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)	
CHRISKIRKMAN @ hris Kirkman	
(Typed or printed name of person signing)	
President	
(Title of person signing)	