## P99000103878

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8/30/24 KH

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPOR	RATION: Cool Screens, Inc.				
DOCUMENT NUMI	P00000103878				
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.			
Please return all corres	spondence concerning this ma	atter to the following:			
	Pat Villa, President				
		Name of Contact Person	n		
	Cool Screens, Inc.				
		Firm/ Company			
	14365 Cedar Island Rd				
	Address				
	Jacksonville, FL 32250				
	City/ State and Zip Code				
	pat@coolscreensinc.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	n concerning this matter, plea	se call:			
Pat Villa		at ( <u>904</u>	237-4756		
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:		
S35 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)		
Ame Divi	ling Address ndment Section sion of Corporations Box 6327	Amend Divisio	Address ment Section n of Corporations entre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

Cool Screens, Inc.		
( <u>Name of Corporatio</u>	on as currently filed with the Florida Dept. of State)	
	nent Number of Corporation (if known)	
·	a Statutes, this Florida Profit Corporation adopts the following	; amendment(s) to
A. If amending name, enter the new name of the co	orporation:	
		The new
	orporation," "company," or "incorporated" or the abbreviation " or "Co". A professional corporation name must contain eviation "P.A."	
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADD</u>	DRESS )	
		·
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	W.	
(Stating duaress SIAT BE A POST OFFICE BO.	<u></u>	<del></del>
		<del></del>
D. If amending the registered agent and/or register	red office address in Florida, enter the name of the	
new registered agent and/or the new registered of	office address:	
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:	. Florida	
	(City) (Zip C	ode)
New Registered Agent's Signature, if changing Regit hereby accept the appointment as registered agent. If	ustered Agent: I am familiar with and accept the obligations of the position.	
		~ 1
	A mark Viva Decision and A mark (Calculation	,
Signa	ature of New Registered Agent, if changing	
Check if applicable		
☐ The amendment(s) is/are being filed pursuant to s. 6	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 = Ghairman 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	PT	John Doc	
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	Juan Villa	14365 Cedar Island Rd
X Add			Jacksonville, FL 32250
Remove			
2) Change	T	Philip Villa	14365 Cedar Island Rd
X Add			Jacksonville, FL 32250
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		_	
Add			
Remove			

Attach au	ling or adding additi Iditional sheets, if ne	cessary). (Be spec				
			<del></del>		<del></del>	
					<del></del>	
		•				-
		<del></del>	<del></del> .			
			<del></del>			
f an ame	endment provides fo	or an exchange, recl	assification, or c	ancellation of issi	ied shares.	
provisio	ns for implementing	the amendment if	not contained in	the amendment	itself:	
(if n	ot applicable, indicat	te N/A)				
		-				-

The date of each amendment(s) as	loption:	, if other than the
date this document was signed.  09/1  Effective date if applicable:	1/24	
micetive date in applicable.	(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this partment of State's records.	date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were add action was not required.	pted by the incorporators, or board of directors without shareholder a	action and shareholder
■ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes east for the amendme fficient for approval.	ent(s)
	roved by the shareholders through voting groups. The following stat each voting group entitled to vote separately on the amendment(s):	ement
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by Pat Villa	**	
	(voting group)	
09/11/24 Dated		
Signature	Pat Villa	
selected	rector, president or other officer – if directors or officers have not be l, by an incorporator – if in the hands of a receiver, trustee, or other c ed fiduciary by that fiduciary)	
	Pat Villa	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	