## P01000090725

(Re	questor's Name)	<del></del>
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Document Number)		
Certified Copies	•	
Special Instructions to	Filing Officer:	

Office Use Only



300156067803

05/19/09--01019--007 \*\*35.00

2009 JUN -8 PH 12: 06
SECRETARY OF STATE

Amend TB 4/9/09

TO: Amendment Section

Division of Corporations				
NAME OF CORPORATION: Fosco Ak & appliance Suce Corp.				
DOCUMENT NUMBER: <u>PO 10 000 90725</u>				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this ma	atter to the following:			
Clara Schuster.				
Name	of Contact Person			
Fasco AlC G	appliance.			
		•		
1300 NE Unavei Landers DY.				
N. M. Beach Fl. 33179  City/ State and Zip Code				
City/ S	State and Zip Code	····		
Clan hell 13 to @ac/. com 33179.  E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Clara Schuster	at (301) 3544708			
Name of Contact Person	Area Code & Daytime Telephone N	umber		
Enclosed is a check for the following amount made payable to the Florida Department of State:				
\$35 Filing Fee \$\text{Certificate of Status}\$	Certified Copy Certi (Additional copy is enclosed) Certi	50 Filing Fee ificate of Status ified Copy litional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle			
Tallahassee, FL 32301				



## FLORIDA DEPARTMENT OF STATE Division of Corporations

May 26, 2009

CLARA SCHUSTER
FASCO A/C & APPLIANCE SVCE CORP.
1300 NE MIAMI GARDENS DR
N MIAMI BEACH, FL 33179

SUBJECT: FASCO A/C & APPLIANCE SVCE CORP.

Ref. Number: P01000090725

We have received your document for FASCO A/C & APPLIANCE SVCE CORP. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

The date of adoption of each amendment must be included in the document.

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) 245-6925.

Teresa Brown Regulatory Specialist II

Letter Number: 109A00017634

AGI**NOJ**E ELEKTRAGES AGI**NOJ**E ELEKTRAJIJAT

J:3 HA 8-HUL 6001

H UHY

	Articles of A	mendment	E.
• • •	to		
	· Articles of Inc of	corporation	19 July - 5/
Fasco Alc &		e Suce Corp MILLA	NO JUN S PHIE: O
(Name of Corporation as cu		the Florida Dept. of State)	ASSE OF CO
P01000 90725		·	FLORIE
	lumber of Corporat	tion (if known)	$\cdot o_{\mathcal{A}}$
Pursuant to the provisions of section 607.1 amendment(s) to its Articles of Incorporation		tes, this Florida Profit Corporation	adopts the following
A. If amending name, enter the new name	of the corporation	on:	
			77
name must be distinguishable and contai abbreviation "Corp.," "Inc.," or Co.," or name must contain the word "chartered," "p	the designation "C	Corp," "Inc," or "Co". A profession attion," or the abbreviation "P.A."	
B. Enter new principal office address, if a (Principal office address MUST BE A STR.		17038 W. Drxie H	<u>lwy</u>
C. Enter new mailing address, if applical (Mailing address MAY BE A POST OF		N. Miami Beach	<u>F</u> I. 33 160 —
D. If amending the registered agent and/onew registered agent and/or the new received agent and/or the new registered agent			of the
Name of New Registered Agent:	Marlow	Barrias	
New Registered Office Address:		OL 25 CT.  rida street address)	•
	N. Hiam (City)	,	33179
New Registered Agent's Signature, if chan			Ceba maaisi
I hereby accept the appointment as registere	a ageni. I am jam	priar with ana accept the obligations of	ine position.
_	Signature of	Registered Agent, if changing	

Page 1 of 3

## 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)

<u>Title</u>	Name	Address	Type of Action
5_	Bames Merlon	2/310 NEZVET. N. Mace Beach FI 33179	. ⊠ Add _ □ Remove
<del></del>			Add Remove
			Add Remove
	ling or adding additional Articles, enter Iditional sheets, if necessary). (Be spec		
· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		
<u>provisio</u>	nendment provides for an exchange, remains for implementing the amendment in the applicable, indicate N/A)	eclassification, or cancellation of iss f not contained in the amendment i	ued shares, tself:

The date of each amendment(s) a	doption: 05/02/09
Effective date if applicable:	- / / ·
· (no	more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) officient for approval.
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cast i	for the amendment(s) was/were sufficient for approval
by	ing group)
(voti	ng group)
The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder
The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder
Dated 5//2	un Policister
Signature /a	un Policister
(By a dire	ector, president or other officer - if directors or officers have not been
	by an incorporator – if in the hands of a receiver, trustee, or other court d fiduciary by that fiduciary)
. <u>C</u> .	Ara Schuster  (Typed or printed name of person signing)
	(Typed or printed name of person signing)
<b>V</b> 7	rce-Presiduit-
-	(Title of person signing)