P020000 86132

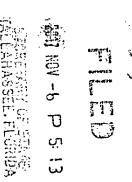
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COVER LETTER

TO: Amendment Section

Tallabassee, FL 32314

Division of Corporations
NAME OF CORPORATION: APPLIANCE GALLERY, INC
DOCUMENT NUMBER: P02000086132
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Contact Person
HPPLIANCE GALLERY LNC
13055 STARKEY PD
LARGO, L. 33773
City/ State and Zip Code Applaall a Jamsabay. Mr. Com R-nfail address: (to be used for future annual report notification)
For further information concerning this matter, please call: April
Enclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) S2.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Boy 6327 Street Address Amendment Section Division of Corporations Clifton Building

2661 Execurive Center Circle Tallahasses, FL 32301

Articles of Amendment

to

Articles	of I	Incorpo	ration
		of _	1

applance	Hall	erus -	Inc_	
(Name of Corporation	as currently file	ed with for Florida I	Dept. of State)	
$\mathcal{P}_{\mathcal{U}}$	02000	00861	32.	
(Documer	nt Number of Cor	poration (if known)		,
Pursuant to the provisions of section 607.1006, Florida S its Articles of Incorporation:	Statutes, this <i>Flor</i>	ida Profix Corporatio	a adopts the follow	ving amendment(s) to
A. Is mending name, enter the new name of the corp	oration:			
				The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co" or the designation "Corp." word "chartered," "professional association," or the ab B. Euter new principal office address, if applicable:	"Inc," or "Co".	A processional cor		
(Priverpal office address MUST BE A STREET ADDR	ESS)			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		n Florida, enter the	name of the	•
Name of New Registered Agent				
	(Florida street a	ddress)		
Now Projectored Office Address			. Florida	
New Registered Office Address:	(City)	 -'	ip Code)
New Registered Agent's Signature, if changing Regist	tered Agent:			rs: #14 - 李寶朝
I hereby accept the appointment as registered agent. I a	am familiar with	and accept the obliga	tions of the positio	
				S. C.
Signati	ure of New Regis.	tered Agent, if changi		- Vinerial

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.

X Change	PT John Doc	
X Remove	<u>V</u> <u>Mike Jones</u>	
X Add	SV Sally Smith	
Type of Action (Check One)	Title Name	Address
1) Change	thes. Stanley Test	in Jaka Pl
Add Remove	()	Largo Il 33173
2) Change	IP Lynn Kislen	13055 Starkey Ld
Add Remove		Xargo 51 33410
3) Change	Thes Synn Kestin	13055 Starkey Kd Lugar Al 39773
Add Remove		
4) Change		
Add Remove		
5) Change		· · ·
Add		· .
Remove		
6) Change		
Add		
Remove		

f amending or ade	dipg additional Article	es, enter change(s) here: (Be specific)			
Attach additional s	heets, if necessary). ((Be specific)			
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\ /					
f an amendment r	provides for an exchan	ige, reclassification, or c	ancellation of issued	shares.	
provisions for im	plenienting the amend	ment if not contained in	the amenatuent itsel	<u>f:</u>	
(ų not applica	ble_indicate N/A)				•
					<u>-</u> .
					

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: 10-23-17	•
(no more than 90 days after amenament file date)	
Note: If the date inserted in this block does not meet the applicable statutory tiling requirements, this date will document'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)	
(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.	· ·
Dated	•
Signature Lynn Kiskin	
(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)	
LYNN KISLIN	
(Typed or printed name of person signing)	
VP to thes.	
(Title of person signing)	