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Division of Corporations  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

08 MAY -2 PM 2:27

**FILED****COR AMND/RESTATE/CORRECT OR O/D RESIGN****TORRES APPLIANCES REPAIRS & SERVICE, INC.**

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TALLAHASSEE, FLORIDA

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5/5-01

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** TORRES APPLIANCES REPAIRS & SERVICE, INC.

**DOCUMENT NUMBER:** P07000084299

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

TORRES, FREDY

(Name of Contact Person)

TORRES APPLIANCES REPAIRS & SERVICE, INC.

(Firm/ Company)

1190 W 54 ST

(Address)

HIALEAH, FL. 33012

(City/ State and Zip Code)

For further information concerning this matter, please call:

TORRES, FREDY

(Name of Contact Person)

at ( 305 ) 439-8991

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$35 Filing Fee

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**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

Articles of Amendment  
to  
Articles of Incorporation  
of

TORRES APPLIANCES REPAIRS & SERVICE, INC.

(Name of corporation as currently filed with the Florida Dept. of State)

P07000084299

(Document number of corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**NEW CORPORATE NAME (if changing):**

F E SERVICES, INC.

(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")

(A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")

**AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE)** Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: **(BE SPECIFIC)**

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(Attach additional pages if necessary)

If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

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(continued)

SECRETARY OF STATE  
ALLIANCE, FLORIDA

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The date of each amendment(s) adoption: 05/02/2008

Effective date if applicable: 05/02/2008

(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

☐ The amendment(s) was/were approved 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.

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)

TORRES, FREDY

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

FILING FEE: \$35