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TO: Amendment Section

Division of Corporations
NAME OF CORPORATION: C & S Home Appliance Service Inc.
DOCUMENT NUMBER: P09000033105
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Plex A. Khoja CPA, B Name of Contact Person
Afex A. Khoja CPA.PA Firm/Company
11820 Miramar Park way Suite 205
Miramar FL 33025 City/ State and Zip Code
ekhoja @ akhoja pa. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Plex A. Khôja ClA at (954) 447-3272 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee Scrifficate of Status S23.75 Filing Fee Certificate of Status Certified Copy Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

CAS Home A	PPLIANCE	SERVICES	IWC.	
(Name of Corporation as currently	y filed with the Flori	da Dept. of State)	2.0.	
P 09000	33105			
(Document Number	of Corporation (if kn	own)	_	
Pursuant to the provisions of section 607.1006, Flamendment(s) to its Articles of Incorporation:	lorida Statutes, this a	Florida Profit Corpora	ntion adopts the follow	ving
A. If amending name, enter the new name of the	corporation:			
NEW ERA APPLIA	NCE REPA	rik INC.	The new	
name must be distinguishable and contain the abbreviation "Corp.," "Inc.," or Co.," or the destinance must contain the word "chartered," "professi	word "corporation, ignation "Corp," "Ir	" "company," or "inc nc," or "Co". A profe	corporated" or the essional corporation	
B. Enter new principal office address, if applical (Principal office address MUST BE A STREET A)		•		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I		in Elonida autor the	S PAT	こって
new registered agent and/or the new registere		in Fiorida, enter the i	raine withe	
Name of New Registered Agent:				
New Registered Office Address:	(Florida street	address)		
		, Flori	do	
	(City)	(Zip Code)	ua	
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent		• and accept the obligati	ons of the position.	
Signa	ture of New Register	ed 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: (Aftiach additional sheets, if necessary)

<u>Title</u>	Name	Address	Type of Action
			☐ Add ☐ Remove
1			Add Remove
			Add Remove
t. If amendin (attach addii	g or adding additional Articles, enter c tional sheets, if necessary). (Be specific	hange(s) here:	
			•
provisions	Idment provides for an exchange, recla for implementing the amendment if no applicable, indicate N/A)	ssification, or cancellation of issect contained in the amendment in	ued shares, tself:

The date of each amendment(s) adoption: $1/23/20/0$
Effective date <u>if applicable</u> :	(date of adoption is required)
(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	st for the amendment(s) was/were sufficient for approval
by	95
(1	poling group)
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder
Dated	23/16
select	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)
	Thelma Carter
	(Typed or printed name of person signing)
	President
4	(Title of person signing)