P9300035/39

(Rec	questor's Name)	
(Add	lress)	
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(City	//State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	
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Missing.

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORI	PORATION:	New England Holdings,	lnc.
DOCUMENT NUMBER:		P93000035139	
The enclosed Artic	cles of Amendment and fee	are submitted for filing.	
Please return all co	orrespondence concerning th	nis matter to the following:	
		(arl F. Stammen, Jr.	
	, 1	Name of Contact Person	
	Star	mmen and Associates	
		Firm/ Company	
	137 :	South Street, 3rd Floor	
		Address	
		Boston, MA 02111	
	. (City/ State and Zip Code	
·	stamme E-mail address: (to be us	enlaw@gmail.com ed for future annual report notification)	
For further informa	ation concerning this matter	, please call:	
Kar	l F. Stammen, Jr.	at (617) 23 Area Code & Daytime Tel	27-8050
Name	of Contact Person	Area Code & Daytime Tel	ephone Number
Enclosed is a checl	k for the following amount i	made payable to the Florida Depart	tment of State:
□\$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Ac Amendmen Division of P.O. Box 6 Tallahassee	nt Section Corporations 327	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	e

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 17, 2010

KARL F STAMMEN JR 137 SOUTH ST 3 FLOOR BOSTON, MA 02111

SUBJECT: NEW ENGLAND HOLDINGS, INC.

Ref. Number: P93000035139

We have received your document for NEW ENGLAND HOLDINGS, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above listed corporation was administratively dissolved or its certificate of authority was revoked for failure to file its 2009 corporate annual report form. To reinstate, the corporation must submit a completed reinstatement application/annual report and the appropriate fees.

The fees to reinstate the corporation are as follows: \$600.00 reinstatement fee, \$150.00 filing fee per year for each year the corporation has been dissolved.

Therefore, the total amount due to reinstate the corporation is \$900.00. Add an additional \$8.75 for each certificate of status requested.

The total amount due includes the 2010 Annual Report and Supplemental Fee.

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) 245-6957.

Tracy L Lemieux Regulatory Specialist II

Letter Number: 810A00026987

RECEIVED

www.sunbiz.org

Articles of Amendment to Articles of Incorporation of

New Englan	d Holdings, Inc.		
(Name of Corporation as current	tly filed with the Florid	a Dept. of State)	
P9300	00035139		
(Document Number	er of Corporation (if kno	wn)	
Pursuant to the provisions of section 607.1006, amendment(s) to its Articles of Incorporation:	Florida Statutes, this F	orida Profit Corporation ado	pts the following
A. If amending name, enter the new name of the	ne corporation:		
Here We	Go Again, Inc.		The new
name must be distinguishable and contain the abbreviation "Corp.," "Inc.," or Co.," or the de name must contain the word "chartered," "profes	esignation "Corp," "Inc	," or "Co". A professional c	
B. Enter new principal office address, if applic			_
(Principal office address MUST BE A STREET)	ADDKESS)		
 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE) D. If amending the registered agent and/or regnew registered agent and/or the new registered. 	istered office address i	n Florida, enter the name of t	 <u>he</u>
Name of New Registered Agent:		 	
<u>New Registered Office Address</u> :	(Florida street a	oddress)	
		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing	Registered Agent:	* \ .	
I hereby accept the appointment as registered age.	nt. I am familiar with a		position.
Sigr	nature of New Registered	l 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:

(Attach additional sheets, if necessary)

<u>Title</u>	Name	Address	Type of Action
<u>VP</u>	Frances	5141 Nash Trail Lake Worth, FL 33463	
<u>VP</u>	Aaron Pope	5141 Nash Trail Lake Worth, FL 33463	☑ Add □ Remove
	dditional sheets, if necessary). (Be sp		
provisi	mendment provides for an exchange, ons for implementing the amendment of applicable, indicate N/A)		
	**		

The date of each amendmen	t(s) adoption: November 8, 2010
	(date of adoption is required)
Effective date if applicable:	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement and 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/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder
Dated	11-9-2010
sele	a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	(Typed or printed name of person signing)
`	President (Title of person signing)
	(Title of person signing)