P07000060961

(Re	equestor's Name)	
(Ad	dress)	
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SEP 1 5 7015 C. CARROTHERS



COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPORATION: TC HOME INS	SPECTIONS, INC.	
DOCUMENT NUMBER: P07000060961		
The enclosed Articles of Amendment and fee are	e submitted for filing.	
Please return all correspondence concerning this	matter to the following:	
MICHAEL HALEY		
	Name of Contact Person	n
TC HOME INSPECTION	IS, INC.	
	Firm/ Company	
450 OAKMON RD. SW	,,,,,,,,,	
<u> </u>	Address	
PALM BAY/FL 32908		
	City/ State and Zip Cod	e
HALEYMX@GMAIL.COM		
E-mail address: (to be	e used for future annual report	notification)
For further information concerning this matter, p	lease call:	
MICHAEL HALEY	at (³²¹	7237322 de & Daytime Telephone Number
Name of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount ma	de payable to the Florida Depa	artment of State:
\$35 Filing Fee Certificate of Status		□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

TC HOME INSPECTIONS, INC.				
(Name of Corporation	n as currently filed with the Florida Dept. of State)		
P07000060961				
(Docume	ent Number of Corporation (if known)			
Pursuant to the provisions of section 607.1006, Florida sits Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the	following amen	dment	(s) to
A. If amending name, enter the new name of the cor	poration:			
		The	new	
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp,"	"Inc," or "Co". A professional corporation nam			
word "chartered," "professional association," or the a	poreviation P.A.	r nés	8	,
B. Enter new principal office address, if applicable:			_ <u>:,</u>	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	<u>RESS</u>)	ر المدروب داکست و فرد		7
				[P]
		<u>,,, e.</u>	<u>=</u>	6-40
C. Enter new mailing address, if applicable:		INO INT		
(Mailing address MAY BE A POST OFFICE BOX	0	16 16	อ	
			_	
D 16 17 18 18 18 18 18 18 18 18 18 18 18 18 18				
D. If amending the registered agent and/or registered new registered agent and/or the new registered of				
Name of New Registered Agent				
	(Florida street address)			
New Registered Office Address:	, Florida			
Ten registered Office Haurens.	(City)	(Zip Code)		
New Registered Agent's Signature, if changing Regis				
I hereby accept the appointment as registered agent. I	am familiar with and accept the obligations of the po	osition.		
Cinum	ture of New Registered Agent, if changing			
. Signal	ure oj new kegistereu ngent, ij chunging			

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.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	P	HALEY, JEFF D	223 FARLEY ST SW
Add X Remove			PALM BAY FL 32908
2) X Change	P	HALEY, MICHAEL D	450 OAKMON RD. SW
Add			PALM BAY FL 32908
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
STOCK SELL, HALEY, JEFF SOLD 75 SHARES TO HALEY, MICHAEL
SEE ATTACHMENT
F. If an amendment provides for an 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)
HALEY, MICHAEL IS 100% SHARE HOLDER

	1/01/2016	
The date of each amendment(s) date this document was signed.	adoption:	, if other than the
	01/2016	
Effective date if applicable:	(no more than 90 days after amendment file date)	
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, this dat Department of State's records.	e will not be listed as the
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):	nt
	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting 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	
1/01/201 Dated	6	
Signature		
sele	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court pinted fiduciary by that fiduciary)	
	HALEY, MICHAEL	
	(Typed or printed name of person signing)	
	P	
	(Title of person signing)	