P11000043926

(R€	equestor's Name)	
(Ac	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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Contact of 561-281-2331

COVER LETTER

TO: Amendment Section
Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

11-1/-
NAME OF CORPORATION: a FLE HOME INSPECTIONS EPPONTS IN
NAME OF CORPORATION: a AZZ HOME INSPECTIONS EXPONTS IN DOCUMENT NUMBER: P/16000 43926
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
ROWALD WILLIAM
Name of Contact Person
A 22 Home INSPECTION EXPENS INC Firm/ Company 683 6 GINALON CINCIE BOCA RATIN FL. Address BOCA RATON FL. 3343 3 City/ State and Zip Code
Firm/ Company
683 6 GENALON CINCLE BOCA RATION FL.
Address
BOLA RATON FL. 3343 3
City/ State and Zip Code
RREX 25@ YAHOU.COM
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
ROWALD WILL+AM! at (561) 251-2331 Name of Contact Person Area Code & Daytime Telephone Number
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:
\$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)
Mailing Address Street Address
Amendment Section Amendment Section Division of Corporations Division of Corporations
Division of Corporations Division of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301



PAGE 4 HAS
BEEN COMPLETED
TO AND SIGNED.

FLORIDA DEPARTMENT OF STATE Division of Corporations

October 3, 2012

RONALD WILLIAMS
A2Z INSPECTION EXPERTS INC
6836 GIRALDA CIRCLE
BOCA RATON, FL 33433

SUBJECT: A2Z INSPECTION EXPERTS INC.

Ref. Number: P11000043926

We have received your document for A2Z INSPECTION EXPERTS INC. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please submit the form in its entirety. The last page is missing.

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) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 012A00024520

CEIVED 115 AM II: 37 Geographical

Articles of Amendment Articles of Incorporation

OME INSPECTIONS EXPERTS INC

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

(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:

If amending name, enter the new name of the		
ADZ PROPERTY INSPA ame must be distinguishable and contain the Corp.," "Inc.," or Co.," or the designation "or ord "chartered," "professional association," of	Corp," "Inc," or "Co". A professional	The "incorporated" or the abbrevia I corporation name must contain
Enter new principal office address, if application of the contract of the cont		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	E BOX)	
If amending the registered agent and/or renew registered agent and/or the new regist		the name of the
-	(Florida street address)	
New Registered Office Address:	(City)	, Florida(Zip Code)
ew Registered Agent's Signature, if changing sereby accept the appointment as registered ag		bligations of the position.
Signature	of New Registered Agent, if changing	

Executive Officer; CFO = held. President, Treasurer Changes should be noted	if necess ector title President = Chief F r, Directo in the foi ves the ce	ary) e by the fit; T= Trea Financial for would b Flowing material	:: rst letter of the office title: surer; S= Secretary; D= Di Officer. If an officer/directo e PTD. anner. Currently John Doe i n, Sally Smith is named the V	r holds more the	istee; C = Chairman or Clerk; CEO = Chief an one title, list the first letter of each office ST and Mike Jones is listed as the V. There is would be noted as John Doe, PT as a Change,
X Change	<u>PT</u>	John Do	<u>e</u>		
X Remove	<u>v</u>	Mike Jo	nes		
_X Add	<u>sv</u>	Sally Sm	<u>iith</u>		
Type of Action (Check One)	<u>Title</u>		Name		Address
1) Change	N/A	<u>-</u>		· · · · · · · · · · · · · · · · · · ·	
Add					
Remove					
2) Change	N/u	1			
Add					
Remove	11/				
3) Change	w/n				
Add					
Remove	,				
4) Change	N/	2			
Add					
Remove	. 1	/			
5) Change	N	A-		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Add					the section of the se
Remove					
6) Change	N/1	<u> </u>			
Add	/				

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and

_Remove

ttach additional sheets,	dditional Articles, enter change(s) here: if necessary). (Be specific)
•	1/14
	N V
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'an amendment provid	es for an exchange, reclassification, or cancellation of issued shares,
provisions for impleme	nting the amendment if not contained in the amendment itself:
(if not applicable, i	dicate N/A)
(y,	11/10
	\mathcal{N}/\mathcal{U}
•	
	

The date of each amendment(s) a	10 8 2012
·	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
_	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):
	t for the amendment(s) was/were sufficient for approval
by	(voting group)
action was not required. The amendment(s) was/were ad action was not required.	lopted by the board of directors without shareholder action and shareholder lopted by the incorporators without shareholder action and shareholder
Dated	10/8/2012
Signature	10/8/2012- Souht William
(By a constant)	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 nted fiduciary by that fiduciary)
	ROMALO WELLINW
	(Typed or printed name of person signing) OWNER President
	(Title of person signing)