L21000082642

(Reque	estor's Name)	
(Addre	ss)	
(Addre	ss)	
(City/S	tate/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Busine	ess Entity Nar	ne)
(Docur	nent Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Filin	ng Officer:	

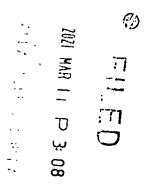
Office Use Only

04/28/2021 S.C.



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COVER LETTER

TO: Registration S Division of Co		→ ,	
	l Home Inspections, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Roy Austin Flournoy Jr.		
		Name of Person	
	Residential Home Inspecti	ons, LLC	
		Firm/Company	
	2597 S. Highway A1A		
		Address	
	Melbourne Beach, FL 329	51	
		City/State and Zip Code	
	CoastalLifeFL@gmail.com	to be used for future annual report notif	(ication)
For further information	concerning this matter, please c		
Roy Austin Flournoy Jr		321 417-1760	(3
Name	of Person	at () Area Code Daytime	e Telephone Number
Enclosed is a check for t	the following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is cosed)
Mailing Addre Registration		Street Address: Registration Sec	ction
Division of 0	Corporations	Division of Cor	porations
P.O. Box 63 Tallahassee,		The Centre of T 2415 N. Monro	'allahassee e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Residential Home Inspections, LLC		
(Name of the Limited Liability Compa (A Florida Limited I	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L21000082642	were filed on 02/18/2021 ar	nd assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	pility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviat	ion "L.L.C."
Enter new principal offices address, if applicable:		<u> </u>
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
		3 (3)
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B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, enter the name of the	o resistered
	-	T ;
Name of New Registered Agent:		
New Registered Office Address:	Ų	ب ک
Now trogistions of the Francisco.	Enter Florida street uddress	0
	Florida	
	•	Code
New Registered Agent's Signature, if changing Registered Agent:	<u> </u>	
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been positied in writing of this change	performance of my duties, and I am familion provided for in Chapter 605, F.S. Or, if this	ar with and s document is

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			□Change
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			□Remove
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Adding IRS EIN Number: 86-	2309896 (IRS Letter is attac	ched).		
				
				
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ar a dan istan ahaa ahaa ahaa	02/18/2021		(optional)	
ctive date, if other than the deflective date is listed, the date must be. If the date inserted in this blooment's effective date on the Department's	be specific and cannot be prior t ck does not meet the applica	to date of filing or more that the statutory filing req	an 90 days after filing.) Pur	suant to 605. not be liste
eord specifies a delayed effective filed.	date, but not an effective tin	me, at 12:01 a.m. on the	e earlier of: (b) The 90	th day after
March 6th	2021	_·		
	Tournoy Signature of member or author			

Filing Fee: \$25.00

Date of this notice: 02-26-2021

Employer Identification Number: 86-2309896

Form: SS-4

Number of this notice: CP 575 G

RESIDENTIAL HOME INSPECTIONS ROY AUSTIN FLOURNOY SOLE MBR 2597 S HIGHWAY A1A MELBOURNE BCH, FL 32951

For assistance you may call us at: 1-800-829-4933

IF YOU WRITE, ATTACH THE STUB AT THE END OF THIS NOTICE.

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 86-2309896. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

When filing tax documents, payments, and related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear off stub and return it to us.

A limited liability company (LLC) may file Form 8832, Entity Classification Election, and elect to be classified as an association taxable as a corporation.:: If the LLC is eligible to be treated as a corporation that meets certain tests and it will be electing S corporation status, it must timely file Form 2553, Election by a Small Business Corporation. The LLC will be treated as a corporation as of the effective date of the S corporation election and does not need to file Form 8832.

To obtain tax forms and publications, including those referenced in this notice, visit our Web site at www.irs.gov. If you do not have access to the Internet, call 1-800-829-3676 (TTY/TDD 1-800-829-4059) or visit your local IRS office.

IMPORTANT REMINDERS:

- * Keep a copy of this notice in your permanent records. This notice is issued only one time and the IRS will not be able to generate a duplicate copy for you. You may give a copy of this document to anyone asking for proof of your EIN.
- * Use this EIN and your name exactly as they appear at the top of this notice on all your federal tax forms.
- * Refer to this EIN on your tax-related correspondence and documents.

If you have questions about your EIN, you can call us at the phone number or write to us at the address shown at the top of this notice. If you write, please tear off the stub at the bottom of this notice and send it along with your letter. If you do not need to write us, do not complete and return the stub.

Your name control associated with this EIN is RESI. You will need to provide this information, along with your EIN, if you file your returns electronically.

Thank you for your cooperation.

02-26-2021 RESI O 999999999 SS-4 (IRS USE ONLY) 575G

Keep this part for your records.

Return this part with any correspondence so we may identify your account. Please correct any errors in your name or address.

CP 575 G

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Your Telephone Number Best Time to Call DATE OF THIS NOTICE: 02-26-2021 EMPLOYER IDENTIFICATION NUMBER: 86-2309896

FORM: SS-4

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INTERNAL REVENUE SERVICE CINCINNATI OH 45999-0023 Maddahlalalalalalladlaablablal

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RESIDENTIAL HOME INSPECTIONS ROY AUSTIN FLOURNOY SOLE MBR 2597 S HIGHWAY ALA MELBOURNE BCH, FL 32951