P04000042133

(Re	equestor's Name)	
. (Ac	idress)	
(Ac	ldress)	•
. (Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bı	usiness Entity Na	me) ·
(DX	ocument Number))
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
	•	

Office Use Only



900173036619

03/26/10--01009--025 **43.75



9. 80 NAR 2 9 2010

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	Arima Hom	e Inspections, Inc.	·
DOCUMENT NUMBER:	P0400004	2133	
The enclosed Articles of Amenda	nent and fee are s	ubmitted for filing.	
Please return all correspondence	concerning this m	atter to the following:	
	Scott 712 Name	etcher of Contact Person	
	Firima Ho	ine Inspections, Inc.	
	1630	The 12th Fairway Address	
	Welling to	on 71. 33414 State and Zip Code	· · · · · · · · · · · · · · · · · · ·
E-mail ac	mahomein sp G idress: (to be used for	Gol. Com future annual report notification)	
For further information concerning	ng this matter, plea	ase call:	
Scott Fletcher Name of Contact Perso		at (56') 753-84 Area Code & Daytime Tele	phone Number
Enclosed is a check for the follow	ving amount made	payable to the Florida Depart	ment of State:
□ \$35 Filing Fee □ \$43.75 Fil Certificate	ling Fee & e 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 Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	e

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

Common Corporation as currently filed with the Florida Dept. of State		of			70
(Name of Corporation as currently filed with the Florida Dept, of State) P 040000 42123 (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: A. If amending name, enter the new name of the corporation: A. If amending name, enter the new name of the corporation: A. If amending name, enter the new name of the corporation: A. If amending name, enter the new name of the corporation: A. If amending name, enter the new name of the corporation: A. If amending name, enter the new name of the corporation: A. If amending name, enter the new name of the corporation: A. If amending name, enter the new name of the corporation: A. If amending name, enter the new name of the corporation: A. If amending name, enter the new name of the corporation: B. If a principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) A. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: A. If amending the registered agent and/or registered office address: Name of New Registered Agent: I 30 The 15th Tairway	Arima Home In	spections. I	nc.		6
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: A. If amending name, enter the new name of the corporation: A. If amending name, enter the new name of the corporation: A. If amending name, enter the new name of the corporation: A. If amending name, enter the new name of the corporation: A. If amending name, enter the new name of the corporation: A. If amending name, enter the new name of the corporation: A. If amending name, enter the new name of the corporation: A. If amending name, enter the new name of the corporation: A. If amending the word "Corporation of "Corp." "Inc." or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) I. 30 The 13 th 10 rucy Welling ton, 11. 33 4/4 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: S. Coff 1 let 16 (City) (2ip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	(Name of Corporation as cur	rently filed with	the Florida De	pt. of State)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: A. If amending name, enter the new name of the corporation: A. If amending name, enter the new name of the corporation: A. If amending name, enter the new name of the corporation: A. If amending name, enter the new name of the corporation: A. If amending name, enter the new name of the corporation: A. If amending name, enter the new name of the corporation: A. If amending name, enter the new name of the corporation: A. If amending name, enter the new name of the corporation: A. If amending name, enter the new name of the corporation: A. If amending name, enter the new name of the corporation: A. If amending name, enter the new name of the eabbreviation: B. If a new principal office address, if applicable: A. If a new principal office address, if applicable: A. If a new principal office address, if applicable: A. If a new principal office address, if applicable: A. If a new principal office address, if applicable: A. If a new principal office address, if applicable: A. If a new principal office address, if applicable: A. If a new principal office address, if applicable: A. If a new principal office address, if applicable: A. If a new principal office address, if applicable: A. If a new principal office address, if applicable: A. If a new principal office address, if applicable: A. If a new principal office address, if applicable: A. If a new principal office address, if applicable: A. If a new principal office address, if applicable: A. If a new principal office address, if applicable: A. If a new principal office address, if applicable: A. If a new principal office address, if applicable: A. If a new principal office address, if applicable: A. If a new principal office address and a new principal office address and a new principal office address. A. If a ne	0				
A. If amending name, enter the new name of the corporation: A. If amending name, enter the new name of the corporation: A. If amending name, enter the new name of the corporation: A. If amending name, enter the new name of the corporation: A. If amending name, enter the new name of the corporation: A. If amending name, enter the new name of the corporation: A. If amending name, enter the new name of the corporation: A. If amending name, enter the new name of the corporation: A. If amending name, enter the new name of the distinguishable and contain the word "chartered," "professional corporation." or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) IL 30 The 10 th 7airwy Luc Hirry ton, 4L. 33 4/4 C. Enter new malling address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: Scott Fletcher 1130 The 10 th 7airwy New Registered Office Address: (Florida street address) We have Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. Lam familiar with and accept the obligations of the position.	(Document Nu	ımber of Corporati	ion (if known)		
Aring Home Inspections and Maintenance, Inc. The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) IL30 The 13th Tairway Lighting ton, TL 33 4/4 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address: Name of New Registered Agent: Scott Helac Is30 The 13th 12th 18th 18th 18th 18th 18th 18th 18th 18			es, this <i>Florid</i>	a Profit Corporatio	on adopts the following
abbreviation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 1630 The 12th Tairwy	A. If amending name, enter the new name	of the corporation	<u>n:</u>		
(Principal office address MUST BE A STREET ADDRESS) 1130 The 12th Fairway Welling ton, 4L. 33 4/4 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: Scott Fletcher 130 The 12th Tally New Registered Agent: (Florida street address) Welling ton, 41 334/4. Florida (City) New Registered Agent's Signature, if changing Registered Agent: 1 hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	abbreviation "Corp.," "Inc.," or Co.," or the	he designation "Co	orp," "Inc," or	r "Co". A professi	ional corporation
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: Scott Fletcher 1630 The 1044 Fairway New Registered Office Address: (Florida street address) Withing the 334/14. Florida (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.			1630	The 12th Fai	ruzy
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: Scott Fletcher 130 The 12th Florida (Florida street address) New Registered Office Address: (Florida street address) With a the 33th 33th Florida (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.					
Name of New Registered Agent: Scott Fletcher					
New Registered Office Address: (Florida street address) (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.				orida, enter the nar	ne of the
New Registered Office Address: (Florida street address) (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	Name of New Registered Agent:	Scott 7	letcher		
(City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	New Registered Office Address:				
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.		Welling (City)	g 40n		
Signature of New Registered Agent, if changing				ccept the obligation	s of the position.
		Signature of New	Registered Age	ent, 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>President</u>	Scotl Fletcher	16'30 The 12th Fairway Westington, FL 33414	Add Remove
	Paul A. Krosper Esq.	625 N. Algeler Dr. 9th Floor west Elm Biget A 33401	☐ Add ☐ Remove
NAMES AND ADDRESS OF THE PARTY			☐ Add ☐ Remove
	ng or adding additional Articles, enter c itional sheets, if necessary). (Be specific		
provision	ndment provides for an exchange, recla s for implementing the amendment if n applicable, indicate N/A)		
No.			

The date of each amendment(s) adoption: 3/15/10
(date of adoption is required) Effective date if applicable: (no more than 90 days after amendment file date)
Effective date if applicable: (no more than 90 days after amendment file date)
(no more than 90 days after amenament file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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)
(voting group)
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated 3 april 2
Signature JAH (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court
appointed fiduciary by that fiduciary)
(Typed or printed name of person signing)
(Title of person signing)