## P0500035555

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Elite Music	Entertainment, Inc
DOCUMENT NUMBER: P05000135855	
The enclosed Articles of Amendment and fee	are submitted for filing.
Please return all correspondence concerning th	is matter to the following:
Bo Wolfand	
Home Inspect 360, Inc.	Name of Contact Person
	Firm/ Company
12472 Lake Underhill F	dd #221
Orlando, Fl 32828	Address
	City/ State and Zip Code
hinspect360@gmail.com	
E-mail address: (10	be used for future annual report notification)
For further information concerning this matter,	please call:
Bo Wolfand	at (321 ) 285-2160
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount	nade payable to the Florida Department of State:
■ \$35 Fitting Fee □\$43.75 Fitting Fe Certificate of Sta	
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 Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



Elite Music Entertainment, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P05000135855 (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: HOME INSPECT 360, Inc. 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, $\dagger$  or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> ) 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 (Florida street address) New Registered Office Address: (City) New Registered Agent's Signature, if changing Registered Agent: I he eby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered 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) Please note the officer'director title by the first letter of the office title: P = President; V = Vice President; T = Treusurer; S = Secretary; D = Director; TR + Trustee, C + Chairman or Clerk; CEO = ChiefExecutive 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, Mik Jones, V as Remove, and Sally Smith, SV as an Add. Example: X Change <u>PT</u> John Doe X Remove У Mike Jones  $\underline{X}$  Add  $\underline{SV}$ Sally Smith Type of Action Title Address (Check One) 1) \_\_\_\_ Change \_\_\_ Add \_\_\_\_ Remove 2) \_\_\_\_\_ Change \_\_\_\_ Add \_\_\_\_ Remove 3 ) \_\_\_\_ Change \_\_\_\_ Add \_\_\_\_ Remove 4) Change \_\_\_\_ Add \_\_\_ Remove 5) \_\_\_\_ Change \_\_ Add \_\_ Remove

6) \_\_\_\_ Change

\_ \_\_\_ Add

\_\_\_\_ Remove

E. <u>If amending or adding additional Arti</u>	 cles, enter change(s) here:
(Attach additional sheets, if necessary).	( <b>B</b> e specific)
Any lawful business, primarily Home Inspe	etion services
	<u> </u>
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F. If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amer (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
N/A	
· · · · · · · · · · · · · · · · · · ·	

The date of each amendment(s) adoption:	if other than the
Effective date if applicable: (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will no document's effective date on the Department of State's records.	t be listed as the
Adisption 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 omendment(s):	
"The number of votes east for the amendment(s) was/were sufficient for approval	
by	
☐ 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.	
8/28 2017 Dated	
Signature	
(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)	
Bo Wolfand	
(Typed or printed name of person signing)	<del> </del>
President	
(Title of person signing)	