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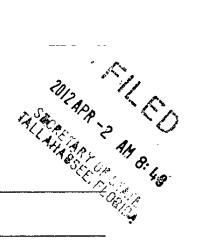
khongh,

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: Mold Profe	ssional Inspecti	on, Inc.
DOCUMENT NUM	BER: P0700004598	32	
The enclosed Articles	s of Amendment and fee are su	ubmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	Ricardo Figueroa	1	
		Name of Contact Perso	n
	Fig & Sons Hand	y Work, Inc.	
	<u> </u>	Firm/ Company	
	1098 NW 83 Ave	-	
		Address	
	Coral Springs, Fl	orida 33071	
		City/ State and Zip Cod	e
fias	shome@gmail.cor	n	
<u></u>		sed for future annual report	notification)
		·	
For further information	on concerning this matter, pleas	se call:	
Ricardo Figu	ieroa	at (305	, 496-8837
Name	of Contact Person		de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:
□ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate 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)
	iling Address		Address
	endment Section		Iment Section
	ision of Corporations  . Box 6327		on of Corporations Building
	lahassee, FL 32314		xecutive Center Circle
	•	Tallaha	assee, FL 32301

## **Articles of Amendment Articles of Incorporation**



## Mold Professional Inspection, Inc.

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

ent(s) to

207000045982		•
(Docume	nt Number of Corporation (if known)	
Pursuant to the provisions of section 607 s Articles of Incorporation:	.1006, Florida Statutes, this <i>Florida Proj</i>	it Corporation adopts the following amend
. If amending name, enter the new n	ame of the corporation:	
Fig & Sons Handy Work	, Inc.	The I
	nation "Corp," "Inc," or "Co". A pro	ny," or "incorporated" or the abbrevial fessional corporation name must contain
. Enter new principal office address,	if applicable:	
Principal office address <u>MUST BE A S</u>	TREET ADDRESS)	
	<del> </del>	
Enter new mailing address, if appl		
(Mailing address MAY BE A POST	OFFICE BOX)	
<b></b>		
new registered agent and/or the ne	<u>nd/or registered office address in Floric</u> w registered office address:	ia, enter the name of the
Name of New Registered Agent	Ricardo Figueroa	
<u>Name oj New Regisierea Ageni</u>	1098 NW 83 Ave.	<del></del>
	(Florida street address)	
	Coral Springs	33071
New Registered Office Address:	(City)	, Florida 33071 (Zip Code)
	. ,	,
ew Registered Agent's Signature, if c		
iereby accept the appointment as regis.	tered agent. I am familiar with and acce	pt the obligations of the position.
_fst	il	
Si	gnature of New Registered Agent, if chan	ging

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><b>P</b>T</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>	<u>Name</u>	<u>Addres</u> s
1) × Change Add Remove	PTD	Ricardo Figueroa	1098 NW 83 Ave. Coral Springs, Florida 33071
2) Change Add Remove	SVD	Vilma P Figueroa	1098 NW 83 Ave.  Coral Springs, Florida 33071
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)	
_	
•	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)
_	

	02.26.2012
The date of each amendment(s) ac	loption: 03-20-20 12
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
	for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
☐ The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder
The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder
Dated 03-26-	2012
Signature Rica	irdo Figueroa
(By a di selected	rector, president or other officer — if directors or officers have not been  I, by an incorporator — if in the hands of a receiver, trustee, or other court  ed fiduciary by that fiduciary)
	Ricardo Figueroa
	(Typed or printed name of person signing)
	PTSD
	(Title of person signing)