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## **COVER LETTER**

\* TO: Amendment Section

Division of Corporations
NAME OF CORPORATION: H29 Emergency Restoration, I
DOCUMENT NUMBER: PPTPPPPPPPPPPPPPPPPPPPPPPPPPPPPPPPPPP
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Gerald Lee Maples- Name of Contact Person
Hao Emergency Restoration, Inc
10130 North lake Blud, #214-293
West Palm Beach, FL 33412 City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
C Lee Maple at (500) 792-8212  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
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

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

Hat Emerger (Name of Corporation as curre	1CY Re	the Florida Dept. of Stat	Inc.	
P07000	<b>中84の</b> mber of Corporat	29		
Pursuant to the provisions of section 607.100 amendment(s) to its Articles of Incorporation:	6, Florida Statu	tes, this Florida Profit C	Corporation adopts	the following
A. If amending name, enter the new name of Emerger and contain abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "pro-	the word "corp e designation "C	poration," "company," - corp." "Inc." or "Co". A	or "incorporated" I professional corp	he new or the oration
B. Enter new principal office address, if app (Principal office address MUST BE A STREE				•
<ul> <li>C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFI)</li> <li>D. If amending the registered agent and/or new registered agent and/or the new registered agent.</li> </ul>	CE BOX) registered office		er the name of the	10 JUN 18 PH 2: 14
Name of New Registered Agent:	Gerald	Lee Maple	<u>5</u>	
New Registered Office Address:	10130 (Flor	North lake (	31 vd, #2	_
New Registered Agent's Signature, if changing I hereby accept the appointment as registered of the second s	(City) ing Robistered A agent. I am fam	Rgent:	Code) obligations of the po	•

## 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: (Anach additional sheets, if necessary)

<u>Title</u>	Name	<u>Address</u>	Type of Action
			☐ Add ☐ Remove
E. <u>If amer</u> (attach d	ding or adding additional Articles, endaditional sheets, if necessary). (Be sp.	ter change(s) here:	
<u> </u>			
provis	mendment provides for an exchange, in ions for implementing the amendment not applicable, indicate N/A)	if not contained in the an	nendment itself:
	•		
		·· <del>······</del>	
			·

The date of each amendment(s) a	doption: <u>COII</u>	1.0
	(date of adoption is t	required) .
Effective date if applicable:	more than 90 days after amendmen	et Clo data)
(no	more inan 90 days after amenamen	ii file aale)
		:
Adoption of Amendment(s)	(CHECK ONE)	•
The amendment(s) was/were ad by the shareholders was/were so		nber of votes cast for the amendment(s)
	proved by the shareholders through each voting group entitled to vote s	voting groups. The following statement separately on the amendment(s):
"The number of votes cast	for the amendment(s) was/were suff	ficient for approval
by		
(vot	ing group) —	
action was not required.  The amendment(s) was/were ad action was not required.	lopted by the incorporators without s	shareholder action and shareholder
Dated	2/14/10 //	' Caluel 12
selected	rector, president or other officer – if , by an incorporator – if in the hands ed fiduciary by that fiduciary)	f directors or officers have not been s of a receiver, trustee, or other court
_	Gerald Lee (Typed or printed name of	person signing)
·	(Title of person signing)	