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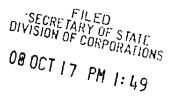
COVER LETTER

• TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Destin Appra	aisal Services, Inc.	E
DOCUMENT NUMBER: <u>P08000063773</u>		
The enclosed Articles of Amendment and fee are	e submitted for filing.	•
Please return all correspondence concerning this	matter to the following:	
	tter / Corporate Paralegal	
(Name of	Contact Person)	
Kevin M	. Helmich, P.A.	
	n/ Company)	- -
Post C	Office Box 5499	
	Address)	
	orida 32540-5499 te and Zip Code)	
For further information concerning this matter, p	lease call:	
Kelly G. Helmstetter / Corporate Paralegal (Name of Contact Person)	at (<u>850</u>) <u>650.4747</u> (Area Code & Daytime	
Enclosed is a check for the following amount ma	nde payable to the Florida Depa	artment of State:
□\$35 Filing Fee	S43.75 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 Cir	cle

Tallahassee, FL 32301

Articles of Amendment to -Articles of Incorporation



...

Destin A	ppraisal Services, Inc.	
(Name of Corporation as cu	rrently filed with the Florida Dept. of	f State)
p	08000063773	
	lumber of Corporation (if known)	
Pursuant to the provisions of section 607.1 following amendment(s) to its Articles of Inc.		ofit Corporation adopts the
A. If amending name, enter the new name	e of the corporation:	
Veritas Appraisal Services, Inc.		
The new name must be distinguishable "incorporated" or the abbreviation "Corp. "Co". A professional corporation no association," or the abbreviation "P.A."	.," "Inc.," or Co.," or the designation	on "Corp," "Inc," or
B. Enter new principal office address, if a (Principal office address MUST BE A STR)		
C. Enter new mailing address, if applicate (Mailing address MAY BE A POST OF)		
D. If amending the registered agent and/o new registered agent and/or the new re		enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	(Florida street address)	
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if chan I hereby accept the appointment as registed position.		ccept the obligations of the
_	Signature of New Registered Agent, if	

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) **Type of Action** Address Title <u>Name</u> ☐ Add □ Remove □ Add ■ Remove ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) F. 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)

The date of each amendmen	t(s) adoption: October 13, 2008.
Effective date if applicable:	October 13, 2008.
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement ed 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/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder
Dated Octo	ober 13, 2008.
Signature	Hohari Due
	a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court
	pointed fiduciary by that fiduciary)
	Stanbania Bayra
	Stephanie Rowe (Typed or printed name of person signing)
	President / Shareholder
	(Title of person signing)