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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: Home Prispections Consultants Inc. DOCUMENT NUMBER: P1300005246
DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Michel Peroz Nodarse Name of Contact Person Firm/ Company 4720 Deer walk Ave Address TAWA 76 33624 City/ State and Zip Code
For further information concerning this matter, please call:
Michel Perez Modos Sat (213) 752-6200 Name of Contact Person Area Code & Daytime Telephone Number
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 Certificate of Status Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) 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 Tallahassee, FL 32301

Articles of Amendment

to Articles of Inco	rporation
/ of	
/tone hispec	roons Cursultanto Inc
	filed with the Florida Dept. of State)
	0005246
(Document Number of C	Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	lorida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Ca.," or the designation "Corp," "Inc," or "C word "chartered," "professional association," or the abbreviation "P	0". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	4720 Deenwalk Cite
(Principal office address MUST BE A STREET ADDRESS)	4720 <u>Deenwalk Cite</u> 774mpa,76 33624
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 addressinew registered agent and/or the new registered office address:	ss in Florida, enter the name of the
Name of New Registered Agent	David Cu
(Florida stree	Decrwalic Cue
	(47)G , Florida 33CZY (21) (21) (21) Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wit	th and accept the obligations of the position.
Signature of New Res	SCORI JUN 21 F

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	PT	John De	n <u>e</u>			
X Remove	$\underline{\mathbf{V}}$	Mike Jones				
_X Add	<u>şv</u>	Sally Sr	nith			
Type of Action (Check One)	Title		<u>Name</u>	Address		
1) Change		_				
Add						
Remove						
2) Change						
Add		_				
Remove				· · · · · · · · · · · · · · · · · · ·		
3) Change						
Add						
Remove						
4) Change						
Add						
Remove						
5. (9)						
5) Change		_		-		
Add						
Remove						
6) Change				, 		
Add						
Remove						

Attach additional sheets, if necessary).	ticles, enter change(s) here: (Be specific)
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<u>. </u>	
	
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an amendment provides for an exclusion provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate NA)	
• • •	
·	
	

. The date of each amendment(s) adoption	n: 6.15-18	, if other than the
date this document was signed.		
Effective date if applicable:	6.15.18	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block didocument's effective date on the Departme	oes not meet the applicable statutory filing requirements, this date ent of State's records.	will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted by the shareholders was/were sufficient	y the shareholders. The number of votes cast for the amendment(s) t for approval.	
☐ The amendment(s) was/were approved must be separately provided for each v	by the shareholders through voting groups. The following statemen coting group entitled to vote separately on the amendment(s):	1
"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 action was not required.	y the board of directors without shareholder action and shareholder	
	y the incorporators without shareholder action and shareholder	
Dated	6.15-12 July	
selected, by an	president or other officer – if directors or officers have not been in incorporator – if in the hards of a receiver, trustee, or other court actary by that fiduciary)	
	Michel Perez Noda (Typed or printed name of person signing) President	se
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	