P13000035905

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AMMA

JUN 24 2016 I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION: The New Home Sp	oot Inc.			
DOCUMENT NUMBE	R: P13000035905		****		
	Amendment and fee are su	bmitted for filing.	•		
Please return all correspo	ondence concerning this mat	ter to the following	g:		
Ja	cob Meyer				
_		Name of Contac	ct Person		
т	The New Home Spot Inc				
<u>-</u>	no rom nome spor me	Firm/Com		<u> </u>	
13	Firm/ Company 1222 SE 47th St Suite 330				
<u></u>		Addres			
	C1 FI 22004	Addres	8		
<u>-</u>	ape Coral, FL 33904	·			
		City/ State and	Zip Code		
Jacob@	thenewhomespot.com				
	E-mail address: (to be us	ed for future annua	al report not	ification)	
For further information of	oncerning this matter, pleas	se call:			
Jacob Meyer		230)	333-0030	
	G B	at (
Name of	Contact Person		Area Code	& Daytime Telephone Number	
Enclosed is a check for t	he following amount made	payable to the Flor	ida Departn	nent of State:	
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Certified Copy (Additional co enclosed)	y	3\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Ameno Divisio P.O. B	ng Address Iment Section on of Corporations ox 6327 assee, FL 32314		Division of Clifton Bu	nt Section of Corporations	

Tallahassee, FL 32301

Articles of Amendment · to Articles of Incorporation of

to Articles of Inco	rporation	1000
of The New Home Spot Inc.	2	SO THE PERSON NAMED IN COLUMN TO THE
•	Glad with the Floride Dept of State)	
P13000035905	filed with the Florida Dept. of State)	
(Document Number of	Corporation (if known)	200
Pursuant to the provisions of section 607.1006, Florida Statutes, this I its Articles of Incorporation:	Florida Profit Corporation adopts the follo	wing amendment(s) to
A. If amending name, enter the new name of the corporation:		
		The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "I	Co". A professional corporation name m	e abbreviation ust contain the
B. Enter new principal office address, if applicable:	1222 SE 47th St Suite 330	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Cape Coral, FL 33904	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1222 SE 47th St Suite 330	
•	Cape Coral, FL 33904	
		·
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:		
Name of New Registered Agent		<u> </u>
(Florida stre	est address!	
(110) taa sire		
New Registered Office Address:	, Florida	Zip Code)
•	(City)	zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w		on.
and a second sec	arra-principal and position	
Signature of Nau R	egistered 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 = 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>PT</u>	John Do	<u>e</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add		_		
Remove				
6) Change		_		
Add				
Remove				

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
	·

The date of each amendment(s) adoption:, if date this document was signed.	other than the
Effective date <u>if applicable</u> : (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 not document's effective date on the Department of State's records.	oe listed as the
Adoption 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 amendment(s):	
"The number of votes cast 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 	
Dated	
(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)	
Jacob Meyer	
(Typed or printed name of person signing)	
President	
(Title of person signing)	