P 130808 74736

<u> </u>	11
(Requestor's Name)	
(Address)	II
(Address)	
(City/State/Zip/Phone #)	
	MAIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of St	tatus
Special Instructions to Filing Officer:	
	11

Office Use Only



200301751352

09/05/17--01004--005 ++35.00

S TALLENT SEP 0 7 2017

Grand

7 SEP -1 PH 1: 35

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	N: Triple B Inspection	ns. Inc.	
DOCUMENT NUMBER:	P13000074736		
The enclosed Articles of Am	endment and fee are su	bmitted for filing.	
Please return all corresponde	nce concerning this ma	atter to the following:	
Mich	el K. Hawking		
Triple	B Inspections, Inc.	Name of Contact Person	
		Firm/ Company	
10097	Cleary Blvd. Suite 50	2	
Plants	ition, FL 33324	Address	
		20, 10, 100, 2, 1	
		City/ State and Zip Code	<u> </u>
scott@epab	ottomline.com		/
<u></u>	-mail address: (to be u	sed for future annual report	notification)
		•	
For further information conc	erning this matter, plea	se call:	
Michael K. Hawking		954 at (255-2300
Name of Con	tact Person	Area Coo	de & Daytime Telephone Number
Enclosed is a check for the fo	 	payable to the Florida Depa	rtment of State:
■ \$35 Filing Fee □	1\$43.75 Filing Fee & Certificate of Status	□S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
P.O. Box 6	nt Section f Corporations	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of

Triple B Inspections, Inc.	ļī ļ			
(Name o	f Corporation as cur	rently filed with the Flo	rida Dept. of State)	
P13000074736	i i			
· · ·	(Document Numb	per of Corporation (if known	own)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006. Florida Statutes.	this Florida Profit Corp	ooration adopts the fol	lowing amendment(s) to
A. If amending name, enter the new na	ime of the corporation	<u>n:</u>		
AIA				The new
name must be distinguishable and con-	tain the word "corpo	ration," "company," or	"incorporated" or	the abbreviation
"Corp.," "Inc.," or Co.," or the design	ation "Corp." "Inc."	or "Co". A profession	al corporation name	must contain the
word "chartered," "professional <mark>as</mark> socia	tion," or the abbreviat	ion "P,A,"		السم ا
		N/A		7.3
B. Enter new principal office address,		*		
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS)			
				
	Ì			m
	1	_		
C. Enter new mailing address, if appli	cable:	NT/ 4		
(Mailing address MAY BE A POST		N/A		. سِ
(g 222.000 <u> 22 00 .</u>	1	_		——: <u>"</u>
	11			
 If amending the registered agent an 			er the name of the	
new registered agent and/or the nev	<u>v registered office ad</u>	dress:		
Name of New Registered Agent	Michael K. Hawking			
	10097 Cleary Blvd. S	Suite 502		
	(Flori	ida street address)		
	Plantation			324
New Registered Office Address:	<u> </u>	(Cital)	, Florida	(Zip Code)
		(City)		(Zip Code)
New Registered Agent's Signature, if c	hanging Registered A	gent:		
I hereby accept the appointment as regist	tered agent. I am fam.	iliar with and accept the	obligations of the pos	ition.
• • • • • • • • • • • • • • • • • • • •	<i>i</i> 1			
	1, 1,			
L.L., M	IA 11211.			
	<u> </u>	New Registered Agent, if		
€'	Signature of N	New Hegistered Agent. If	cnanging	
	1			
	l			

address of each Officer a (Attach additional sheets. Please note the officer/dir P = President; V = Vice if Executive Officer; CFO = held. President. Treasure. Changes should be noted a change. Mike Jones lea Mike Jones, V as Remove	and/or D if necess rector titl President = Chief I r. Director in the for	irector be sary) le by the fir t; T= Trea Financial (or would b llowing ma orporation	ing added:	Director; TR= Trustee; C = Chairman or Clerk: CEO = Chief or holds more than one title, list the first letter of each office is listed as the PST and Mike Jones is listed as the V. There is V and S. These should be noted as John Doe, PT as a Change,
Example: X_Change	<u>PT</u>	John Doc	<u> </u>	
X Remove	<u>V</u>	Mike Jor	<u>ies</u>	
X Add	<u>sv</u>	Sally Sm	<u>uith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	P		 Eyans, Brian	10097 Cleary Blvd.
Add		_		Suite 502
X Remove				Plantation, FL 33324
2) Change	Р		Hawking, Michael K.	10097 Cleary Blvd.
X Add				Suite 502
Remove				Plantation, FL 33324
3) Change				
Add				
Remove				
4) Change		_	- 1	
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		_		
Add				

__ Remove

. If amending or adding additional Article	s, enter change(s) here:
(Attach additional sheets, if necessary). (Be specific)
N/A	
	h
	<u> </u>
	1
	
	<u> </u>
· · · · · · · · · · · · · · · · · · ·	
F. If an amendment provides for an exchan	ge, reclassification, or cancellation of issued shares.
provisions for implementing the amend (if not applicable, indicate N/A)	ment if not contained in the amendment itself:
N/A	
, ,	
	l l
	<u> </u>
	<u> </u>

The date of each amendment		3/25/2017 . if other t	than the
date this document was signed		. If Office to	man the
Effective date <u>if applicable</u> :	100,21,21,1	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the		iot meet the applicable statutory filing requirements, this date will not be listed State's records.	d as the
Adoption of Amendment(s)	(<u>CH</u>	HECK ONE)	
■ The amendment(s) was/wer by the shareholders was/we		shareholders. The number of votes east for the amendment(s) approval.	
		e shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):	
"The number of votes	s cast for the ame	 ndment(s) was/were sufficient for approval 	
by	· -		
	(vo	iting group)	
☐ The amendment(s) was/wer action was not required.	re adopted by the	board of directors without shareholder action and shareholder	
☐ The amendment(s) was/wer action was not required.	re adopted by the	incorporators without shareholder action and shareholder	
08/25 Dated	/2017		
Signature	Maula K H	ident or other officer – if directors or officers have not been	
(E	3y a director, pr¢s elected, by an inc	sident or other officer – if directors or officers have not been opporator – if in the hands of a receiver, trustee, or other court	
		by that fiduciary)	
	Michael K	. Hawking H	
		(Typed or printed name of person signing)	
	President		
		(Title of person signing)	
		<u> </u>	