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COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPOR	RATION: GGTI HOME INS	PECTIONS, INC		
DOCUMENT NUME				
	of Amendment and fee are su	bmitted for filing.		
Please return all corres	spondence concerning this ma	tter to the following:		
	Charlie Plaia			
		Name of Contact Person	n	
	GGTI HOME INSPECTION	S, INC		
		Firm/ Company		
	10328 SE Hobe Hills Dr			
	· · · · · · · · · · · · · · · · · · ·	Address		
	Hobe Sound, FL 33455			
		City/ State and Zip Cod	ť	
eplaia	a@ggtisolutions.com			
	E-mail address: (to be us	sed for future annual report	notification)	130 GCT
For further information	n concerning this matter, pleas	se call:		
Charlie Plaia		561 at (313-7237	COPPERATIONS 3 PM 2: 29
Name o	of Contact Person	Area Co	de & Daytime Telephone Number	2: 29
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:	<u> </u>
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Ame	ling Address endment Section sion of Corporations	Ameno	Address Iment Section on of Corporations	

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

GGTI HOME INSPECTIONS, INC.

P14000029315 (Document Number of Corporation (if know	ida Dent. of State)
	da ivepa di State)
(Dacument Number of Corneration (if know	
(Document Number of Corporation (it know	vn)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corpor</i> its Articles of Incorporation:	ration adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
BENCHMARK INSPECTIONS, INC	The new
name must be distinguishable and contain the word "corporation," "company," or "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional word "chartered," "professional association," or the abbreviation "P.A."	"incorporated" or the abbreviation corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
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 address in Florida, enter	the name of the
new registered agent and/or the new registered office address:	
Name of New Registered Agent	2: 29
(Florida street address)	
New Registered Office Address:	. Florida
(City)	(Zip Code)

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, 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 = Ci Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each off 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 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 Chang Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X.Change	<u>PT</u>	John Doe		
X Remove	<u>V</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		Address
1) Change				
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change				
Add				
Remove				
4) Change		-		
Add				
Remove				
5)Change				
Add				<u> </u>
Remove				
6) Change				
Add				
Remayer				

If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)						
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nravisia	ndment provides for an e is for implementing the a	xcnange, reciassi	contained in the	amendment itsel	snares,	
(if ne	ot applicable, indicate N/A)	Contained to Gre	antenant in itset	!·	
						

The date of each amendmen		, if other than
date this document was signed	l. - 10/04/2019	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this da he Department of State's records.	te will not be listed as
Adoption of Amendment(s)	(CHECK ONE)	
	re adopted by the shareholders. The number of votes cast for the amendment(s ere sufficient for approval.	()
	re approved by the shareholders through voting groups. The following statemed for each voting group entitled to vote separately on the amendment(s):	nt
"The number of votes	s east for the amendment(s) was/were sufficient for approval	
py	(voting group)	
☐ The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholde	ा
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Dated Signature (F	By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other courppointed fiduciary by that fiduciary)	 1
	Charlie Plaia	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	