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(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
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PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Cupaint Instructions to	Filing Officer	
Special Instructions to	Filing Officer:	





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SEC LETARY OF STATE PARE AMASSES, FLORIDA

OCT 13 2014 C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Specialty One Bui	lding Inspections Inc	
DOCUMENT NUM			
The enclosed Article.	s of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this ma	tter to the following:	
	Stephen Groh		
		Name of Contact Persor	1
	Specialty One Building Inspe	ections Inc	
		Firm/ Company	
	1130 Cliffrose Street		
		Address	
	Hollywood, FL 33019		
		City/ State and Zip Code	9
srgr	oh@aol.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, plea	se call:	
Stephen Groh		at (5593330 de & Daytime Telephone Number
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:
\$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)
An Di P.C	niling Address nendment Section vision of Corporations D. Box 6327 Ilahassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Specialty One Building Inspections Inc

	nent Number of Corporation (if known)	
·	•	
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	a Statutes, this <i>Florida Profit Corporation</i> adopts the following as	mendment(s)
A. If amending name, enter the new name of the co		25 55 ne Shew
"Corp.," "Inc.," or Co.," or the designation "Corp, word "chartered," "professional association," or the c	d "corporation," "company," or "incorporated" or the abbr" "Inc," or "Co". A professional corporation name must conabbreviation "P.A."	eviation
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADD		— <u>6</u> ,
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	<u>X</u>)	
D. If amending the registered agent and/or registernew registered agent and/or the new registered of		
new registered agent and/or the new registered (
	office address:	
new registered agent and/or the new registered of New Registered Agent	office address: (Florida street address)	e)

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 <math>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 Doe			
X Remove	<u>v</u>	Mike Jones			
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	<u>Na</u>	<u>me</u>	Address	
1) Change	D	_ Ste	ephen Groh	 	
Add x Remove					
2) Change	<u>P</u>	Ste	ephen Groh	 	
x Add					
Remove 3) Change		_			
Add					
Remove					
4) Change				 	
Add Remove					
5) Change				 	
Add					
Remove					
6) Change		_			
Add					

(Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
<u> </u>	
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
A	
•	

date this document was signed.	
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 a document's effective date on the Department of State's records.	not be 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) wæs/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" (voting group)	
(voting group)	
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 action was not required.	
October 6, 2015 Dated	
Signature Rector	_
(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)	
Stephen Groh	
(Typed or printed name of person signing)	
Director	

(Title of person signing)