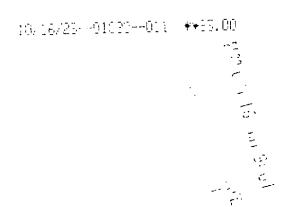
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(Requestor's Name)			
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(Business Entity Name)			
(Document Number)			
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Humble ABODE Home Inspection Services INC.
DOCUMENT NUME	DT (DADA LEGA)
	of Amendment and fee are submitted for filing.
Please return all corres	pondence concerning this matter to the following:
	Pierre R Fortin
	Name of Contact Person
	Humbie ABODE Home Inspection Services INC. Firm/Company
	P-0-B0x 1924
	Address
	Lady Lake, FL 32158 City/ State and Zip Code
	City/ State and Zip Code
	humble abode home Services & Yahoo. Com
	E-mail address: (to be used for future annual report notification)
For further information	n concerning this matter, please call:
Pien	e R Fortin at 352 933-4569
Name o	f Contact Person Area Code & Daytime Telephone Number
Enclosed is a check fo	the following amount made payable to the Florida Department of State:
\$35 Filing Fee	S43.75 Filing Fee & S43.75 Filing Fee & S52.50 Filing Fee Certificate of Status (Additional copy is enclosed) S43.75 Filing Fee & S52.50 Filing Fee Certificate of Status (Certified Copy (Additional Copy is enclosed)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee

Articles of Amendment Articles of Incorporation of

Humble ABode Home Inspection Services INC.
(Name of Corporation as currently filed with the Florida Dept. of State)
PI 60000 15806
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."
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
7973 Penrose PLace ?
(Florida street address)
New Registered Office Address: Wild wood Florida 34785
(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.
Signature of New Registered Agent, if changing

Check if applicable

[☐] The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Add

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 Doe X Remove <u>v</u> Mike Jones X Add \underline{SV} Sally Smith Type of Action Title Name 1 Address (Check One) 1) ____ Change __ Add Remove 2) ____ Change Add Remove __ Change Add __ Remove 4) ____ Change ___ Add __ Remove 5) ____ Change __ Add ___ Remove 6) ____ Change

stach additional sheets, if necessary). (Be specific)	
	
	
an amendment provides for an exchange, reclassification, or cancellation of issued shares,	
orovisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	
	+ -
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The date of each amendment(s) adoption: date this document was signed.	, if other than the
Effective date if applicable:	
(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 n document's effective date on the Department of State's records.	ot be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shaction was not required.	areholder
☐ 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 "	
(voting group)	
Dated	
Signature & The state of	
(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)	
Pierre R. Furtin	.1
(Typed or printed name of person signing)	
Presiden't	7,
(Title of person signing)	-
	÷