# PIWCOOLU0548

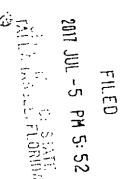
(Re	questor's Name)	
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C. GOLDEN JUL 11 2017

## **COVER LETTER**

Division of Corporations					
NAME OF CORPORATION: MOI OINSPECT TECH  DOCUMENT NUMBER: 1140000 (41) 548					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Ashtia M. Elouidor  Name of Contact Person  Mold Inspect Tech  Firm/ Company  1874 N University Dr Suite 308 A  Plantation Florida 33322  City/ State and Zip Code  Mold &					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
lysheia M. Flouidor at 954 544-9878					
Name of Contact Person Area Code & Daytime Telephone Number					
Enclosed is a check for the following amount made payable to the Florida Department of State:					
\$35 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)  \$35 Filing Fee & Certified Copy (Additional Copy is enclosed)					

## **Mailing Address**

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

## Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## Articles of Amendment

to

# Articles of Incorporation

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FILED

MOLI	D INSPECT TECH INCORPORATED	9017 1111 5 500 5
(Name of Cor	poration as currently filed with the Florida D	2017 .[[!] - 5 PM 5: 52
	. P16000060548	\$E a 11 1 to \$1000
(1	Document Number of Corporation (if known)	TALLAHASSEL FLOOR
Pursuant to the provisions of section 607.1006, I its Articles of Incorporation:	Florida Statutes, this Florida Profit Corporation	adopts the following amendment(s)
A. If amending name, enter the new name of	the corporation:	
name must be distinguishable and contain the	e word "corporation" "company" or "inco	The new
"Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association," of	"Corp," "Inc," or "Co". A professional corp.	oration name must contain the
B. Enter new principal office address, if appli (Principal office address MUST BE A STREET	icable: [ADDRESS]	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	E BOX)	
D. If amending the registered agent and/or re- new registered agent and/or the new registered.	gistered office address in Florida, enter the na ered office address:	ame of the
Name of New Registered Agent		
	(Florida street address)	
	(Florida street address)	
New Registered Office Address:	(City)	_, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing hereby accept the appointment as registered age	Registered Agent: ent. I am familiar with and accept the obligation	ns of the position.
	Signature of New Registered 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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u> <u>Jol</u>	hn Doe	
X Remove	<u>∨</u> <u>Mi</u>	ike Jones	
X Add	<u>SV</u> <u>Sa</u>	lly Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address 1876 N. Universit
1) X Change	<u>V</u>	Grossott Alayloe, JR	Dr Suite 308 A
Add		•	Plantation FL
Remove			33322
2) Change	<u>P</u>	Lysheia M. Elouidor	Dr. Suite 308 A
_X_Add			Plantation FL
Remove			33322
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
Remove			
6) Change			
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•	(Be specific)
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f an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
f an amendment provides for an exchiprovisions for implementing the amer (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
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provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:

The date of each amendment(s) add date this document was signed.	ption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blodocument's effective date on the Department.	ock does not meet the applicable statutory filing requirements, that artment of State's records.	nis date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopt by the shareholders was/were suffi	ted by the shareholders. The number of votes cast for the amendaticient for approval.	nent(s)
☐ The amendment(s) was/were appromust be separately provided for ea	oved by the shareholders through voting groups. The following stated to vote separately on the amendment(s).	ziement
"The number of votes cast fo	r the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were adopt action was not required.	ed by the board of directors without shareholder action and share	holder
The amendment(s) was/were adopt action was not required.	ed by the incorporators without shareholder action and shareholde	¢Γ
Dated	21/17/)	
Signature	A Hox	
	ctor, president or other pfficer - if directors or officers have not b	<del></del>
selected, b	by an incorporator - Kin the hands of a receiver, trustee, or other	court
appointed	fiduciary by that fiduciary)	
G	russett A. laylor, JR	
,	(Typed or printed name of person signing)	
$\overline{I}$	lice President	
	(Title of person signing)	