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S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: DOCUSITE.COM	, INC		
DOCUMENT NUMB				
	of Amendment and fee are su	abmitted for filing.		
Please return all corresp	ondence concerning this ma	tter to the following:		
(CARLINGTON PINNOCK			
-		Name of Contact Person	1	
I	DOCUSITE.COM, INC			
-		Firm/ Company		
ç	0110 ANDORA DRIVE			
-		Address		
1	MIRAMAR, FL 33025			
_		City/ State and Zip Code	0	
YARD	HE4091@HOTMAIL.COM			
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	concerning this matter, pleas	se call:		
CARLINGTON PINNO	ОСК	786 at (663-0222	
Name of	Contact Person		de & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	rtment of State:	
S35 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)	
Mailing Address 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 of

DOCUSITE.COM, INC				
(<u>Name</u>	of Corporation as cu	rrently filed with the	Florida Dept. of S	State)
P17000049867				
	(Document Nur	nber of Corporation (if	known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statute	s, this <i>Florida Profit C</i>	orporation adopts	the following amendment(s) to
A. If amending name, enter the new n	ame of the corporati	on:		
EXPERT HOME INSPECTION SERVI	CES, INC.			The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc.	" or "Co". A profess	or "incorporated sional corporation	I" or the abbreviation
B. Enter new principal office address,	if annlicable:	12609 SW 2	IST STREET	
(Principal office address <u>MUST BE A S</u>		MIRAMAR,	FL 33027	19
				五五五
C. Enter new mailing address, if appl (Mailing address MAY BE A POST	12609 SW 2	IST STREET	NED SSEE	
	MIRAMAR,	FL 33027	- F	
				E7 5
D. If amending the registered agent an new registered agent and/or the ne			enter the name of	the
Name of New Registered Agent	CARLINGTON PIN			
Nume of New Registered Agent	12609 SW 21ST ST	REET		<u></u>
	<u> </u>	rida street address)		
New Registered Office Address:	MIRAMAR FL (City)		TI	33027
			, Floi	(Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regis			the obligations of t	ha mocition
Thereby accept the appointment as regis	terea agent. Tam jan	ништ <i>жил ана иссер</i> и	ne oouganons of th	ne 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 Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John D	<u>oc</u>	
X Remove	<u>V</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally S	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) X Change	VP		DESIREE PINNOCK	12609 SW 21ST STREET
Add				MIRAMAR, FL 33027
Remove				
2) Change		- -		
Add				···
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remove				

If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	If amending or addi (Attach additional sho	ets, if necessary).	Be specific)				
provisions for implementing the amendment if not contained in the amendment itself:	<u> </u>				··		
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(if not applicable, indicate N/A)	provisions for impl	ementing the amend	ment if not co	ntained in the	amendment its	elf:	
	(if not applicab	e, indicate N/A)					
							
			·				
				 			
							<u> </u>
	· · · · · ·						

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: (no more than 90 days after amendment file	
(no more than 90 days after amendment file	date)
Note: If the date inserted in this block does not meet the applicable statutory filing require document's effective date on the Department of State's records.	ments, this date will 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 by the shareholders was/were sufficient for approval.	e amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The foll must be separately provided for each voting group entitled to vote separately on the amen	owing statement dment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action a action was not required.	and shareholder
The amendment(s) was/were adopted by the incorporators without shareholder action and s action was not required.	hareholder
Dated 3-4-19	
Dated3-4-19 Signature	
(By a director, president or other officer – if directors or officers has selected, by an incorporator – if in the hands of a receiver, trustee appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing)	
(Typed or printed name of person signing)	· · · · · · · · · · · · · · · · · · ·
PRE SIDENT	
(Title of person signing)	