P17600071499

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FILED
2021 DEC 22 AM 1: 08
SECRETARY OF STATE



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 9, 2021

MICHAEL HUTCHINSON 10351 DEER RUN WHITE SPRINGS, FL 32096 US

SUBJECT: PIONEER HOME INSPECTION INC.

Ref. Number: P17000071493

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

If the corporation is a **PROFIT** corporation it must be signed 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.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 921A00029688

Jasmine N Horne Regulatory Specialist II

www.sunbiz.org

Articles of Amendment to Articles of Incorporation of

FILED

PIONEER HOME INSPECTION INC.

Check if applicable

 \square The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

2021 DEC 22 AM 1:08

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(Name of Corporation as curren	itly filed with the Florida Dept. of State) SECRETARY OF STATE	
217000071493	TALLAHASSEE, FLUTT	
(Document Number	of Corporation (if known)	
ursuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment	
. If amending name, enter the new name of the corporation:		
UTCHINSON HOLDINGS INC.	The new	
tme must be distinguishable and contain the word "corporation," lnc.," or Co.," or the designation "Corp," "Inc," or "Co", chartered," "professional association," or the abbreviation "P.A.	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word	
3. Enter new principal office address, if applicable:	10351 Deer Run	
Principal office address <u>MUST BE A STREET ADDRESS</u>)	White Springs, FL 32096	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	10351 Deer Run	
	White Springs, FL 32096	
If amending the registered agent and/or registered office ad- new registered agent and/or the new registered office address		
Name of New Registered Agent		
artorida s	street address)	
New Registered Office Address:	, Florida	
New Registered Office Address:	, Florida (Zip Code)	
New Registered Office Address:		
ew Registered Agent's Signature, if changing Registered Agen	(City) (Zip Code)	
New Registered Office Address: ew Registered Agent's Signature, if changing Registered Agentereby accept the appointment as registered agent. I am familiar	(City) (Zip Code)	
ew Registered Agent's Signature, if changing Registered Agen	(City) (Zip Code)	
ew Registered Agent's Signature, if changing Registered Agen	(City) (Zip Code)	

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)

Example:

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 Doc 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.

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)	Title	<u>Name</u>	<u>Addres</u> s
1) Change		NA	
Add			
Remove			
2) Change			
Add			
Remove 3) Change		-	
Add			-
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
NA	
	<u> </u>
<u> </u>	
F. 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)	

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The date of each amendment(s) ac	11/12/2021 doption:	if other than the
date this document was signed.		
	2/2021	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this be document's effective date on the De	lock does not meet the applicable statutory filing requirements, this partment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without shareholder a	ction and shareholder
■ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendme fficient for approval.	nt(s)
must be separately provided for	proved by the shareholders through voting groups. The following state each voting group entitled to vote separately on the amendment(s):	ement
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	rector, president or other officer – if directors or officers have not been also incorporator – if in the hands of a receiver, trustee, or other controls.	
	ed fiduciary by that fiduciary)	
	Michael Hutchinson	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	