P18000060397

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C GOLDEN
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR.	ATION: Mold Inspectors, I	nc.	
DOCUMENT NUMB		-	
	f Amendment and fee are su	ibmitted for filing.	
Please return all corresp	ondence concerning this ma	itter to the following:	
(Gary Robertson		
_	· -	Name of Contact Person	n
	A > / A		
-	N/A	Firm/ Company	
	.825 Ponce De Leon Blvd, #	138/	
		Address	
(Coral Gables, FL 33134		
-		City/ State and Zip Cod	e
<u> </u>	31.1 L'		
Gary(a	kbpelican.com		
	E-mail address: (to be u	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
Gary Robertson		305	776.0226
		at (
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	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)
Amer Divis P.O. 1	ng Address dment Section fon of Corporations Box 6327 nassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of

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2018 JUL 25 PM 12: 03

Mold Inspectors, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) IARY OF STATE TALLAHASSEE, FL P18000060397 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: N/A 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: N/A (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 (Florida street address) New Registered Office Address: _. Florida_ (City) 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

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	PT John Doe	
X Remove	<u>V</u> <u>Mike Jones</u>	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
I) Change	P JARITZA BUTLER	4850 SW 63rd Terrace, #132
Add	·	Davie, FL 33314
X Remove		
2) Change	P Sandra Maisonet	121 Crandon Blvd, \$362
X Add		Key Biscayne, FL 33149
Remove		
3) Change		
Add		
Remove		
4) Change		
Add		
Remove		
5) Change		
Add		
Remove		
6) Change		
Add		
Remove		

E. <u>If amend</u> (Attach <i>aa</i>	ing or adding additional A ditional sheets, if necessary,	rticles, enter change). (Be specific)	e(s) here:		
N/A		• • •			
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F. If an ame	endment provides for an ex	change, reclassifica	tion, or cancellatio	n of issued shares,	
provisio	ns for implementing the an ot applicable, indicate N/A)	nendment if not con	tained in the amen	dment itself:	
N/A	or applicable, material (MI)				
				-	
				<u> </u>	<u>-</u>
		· · · · · · · · · · · · · · · · · · ·			

	N/A	16 3 4 4
The date of each amendment(s) adoption:	, if other than the
date this document was signed.	7/20/2016	
• Effective date <u>if applicable</u> :	7/20/2018	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, thi Department of State's records.	s date will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment sufficient for approval.	ent(s)
	approved by the shareholders through voting groups. The following state for each voting group entitled to vote separately on the amendment(s):	tement
	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not required.	adopted by the board of directors without shareholder action and shareholder adopted by the incorporators without shareholder action and shareholde	
action was not required.	• •	
07/20/20 Dated	018 /hal da	
Signature		
	a director, president or other officer - if directors or officers have not be	en
	cted, by an incorporator - if in the hands of a receiver, trustee, or other	court
арро	pinted fiduciary by that fiduciary)	
	Gary Robertson	
	(Typed or printed name of person signing)	
	VP	
	(Title of person signing)	