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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Gomez Inspections	, Inc	
DOCUMENT NUM			
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Yohan Gomez		
	·	Name of Contact Persor	1
	Gomez General Contractors a	and Inspections, Inc	
	_	Firm/ Company	
	6822 22nd Ave N #218		
		Address	
	St. Petersburg, Fl 33710		
		City/ State and Zip Code	
	yohangomez@gmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
Vohan	Comez,	844 at (476-7722 de & Daytime Telephone Number
Name	of Contact Person	Area Coo	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	☐\\$43.75 Filing Fee & Certificate of Status	☐S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Am Div P,O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Amend Divisio The Co	Address Iment Section in of Corporations entre of Tallahussee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Gomez inspections. Inc		
(Name	of Corporation as curren	tly filed with the Florida Dept. of State)
Gomez General Contractors and Inspecti	ions. Inc	
	(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new n	ame of the corporation:	
Gomez General Contractors and Inspecti	ions, Inc	The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association.	Corp," "Inc," or "Co".	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word "
B. Enter new principal office address,		6822 22nd Ave N #218
(Principal office address MUST BE A S		St. Petersburg, Fl 33710
C. Enter new mailing address, if appl (Mailing address MAY BE A POST) D. If amending the registered agent an new registered agent and/or the new registered a	OFFICE BOX) nd/or registered office adown registered office address	<u>ss:</u>
Name of New Registered Agent	Ross Business Center, Inc.	<u> </u>
	6822 22nd Ave N #218	
	(Florida x	treet address)
New Registered Office Address:	Saint Petersburg	, Florida 33710
		(City) (Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regis.	tered agent. I am familiar	t: with and accept the obligations of the position. 2 Registered Agent, if changing
Check if applicable		

 \blacksquare 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)

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 Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) X Change	P	Yohan D Gomez	11955 3rd Street Flast #3
Add			Treasure Island, FI 33706
Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	l sheets, if necessai	ry). (Be specific)	ange(s) here:			
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f an amendmen provisions for	nt provides for an implementing the	exchange, reclassi amendment if not	ification, or cance contained in the	dlation of issued : amendment itsel	<u>shares,</u> f:	
provisions for	nt provides for an implementing the icable, indicate N/A	amendment if not	ification, or cance contained in the	llation of issued : amendment itsel	<u>shares,</u> f:	
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The date of each amendmen		, if other than the
date this document was signed	1. - 08/18/2021	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this data the Department of State's records.	e will not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/we action was not required.	re adopted by the incorporators, or board of directors without shareholder actio	n and shareholder
	re adopted by the shareholders. The number of votes east for the amendment(s ere sufficient for approval.)
☐ The amendment(s) was/we must be separately provide	re approved by the shareholders through voting groups. The following statement of for each voting group entitled to vote separately on the amendment(s):	ıt
"The number of vote	s cast for the amendment(s) was/were sufficient for approval	
hy	(voting group)	
, .	(voting group)	
Dated	8/18/2021	
_ر Signature ' T	By a director, provident or other officer – if directors or officers have not been	
Si	elected, by an incorporator - if in the hands of a receiver, trustee, or other court	
ប	ppointed fiduciary by that fiduciary)	
	Shan Comez	
	(Typed or printed name of person signing)	
	PRESIDENT	
	Title of person signing)	