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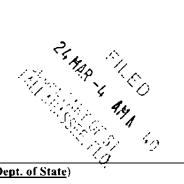
## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	ORATION: HBI Home Service	s Company		
DOCUMENT NUM	1BER:P21000049569			
The enclosed Article	es of Amendment and fee are su	bmitted for filing.		
Please return all corr	respondence concerning this ma	tter to the following:		
	Thomas J Frey			
		Name of Contact Persor	1	
	FBI Home Services Company	y		
		Firm/ Company		
	206 Mason St			
		Address		
	Brandon FL 33511			
		City/ State and Zip Code	2	
	Tom@FLBIgroup.com			
	E-mail address: (to be us	sed for future annual report	notification)	
For further informati	ion concerning this matter, plea	se call;		
Thomas Frey		at ( <u></u>	459 0101	
Name	e 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:	
S35 Filing Fee	S43.75 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		Amend Divisio	Address ment Section of Corporations entre of Tallahassee	
Tallahaccae El 32314		2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of



FBI Home Services Company

(Name of Corporation	on as currently filed with the l	Florida Dept. of State)
P21000049569		
(Досип	nent Number of Corporation (if	known)
Pursuant to the provisions of section 607,1006, Florida its Articles of Incorporation:	Statutes, this <i>Florida Profit Co</i>	forporation adopts the following amendment(s)
A. If amending name, enter the new name of the co	orporation:	
FLBI Home Services Company		The new
name must be distinguishable and contain the word "co "Inc.," or Co.," or the designation "Corp," "Inc, "chartered," "professional association," or the abbre	" or "Co". A professional co	acorporated" or the abbreviation "Corp.,"
B. Enter new principal office address, if applicable	<u></u>	
(Principal office address <u>MUST BE A STREET ADD</u>	ORESS )	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u></u>	
	<del> </del>	
D. If amending the registered agent and/or register	red office address in Florida, e	enter the name of the
new registered agent and/or the new registered		
Name of New Registered Agent		
	-	
	(Florida street address)	<del></del>
New Registered Office Address:		, Florida
New Registered Office Address.	(City)	(Zip Code)
New Registered Agent's Signature, if changing Reg		
I hereby accept the appointment as registered agent.	I am familiar with and accept th	he obligations of the position.
Sione	uture of New Registered Agent,	if changing
Signi	mane of their regimered agem,	A sumagnig

Check if applicable

☐ 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)

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 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.

X Change	<u>PT</u>	John Doe			
X Remove	<u>V</u>	Mike Jor	ne <u>s</u>		
X Add	<u>sv</u>	Sally Sm	<u>nith</u>		
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s	
1) Change		_			
Add					
Remove					
2) Change		_			
Add					
Remove 3 ) Change		- <u>-</u>			
Add					
Remove					
4) Change		_			
Add				·	
Remove					
5) Change		<del>_</del>	*******		
Add					
Remove					
δ) Change		_			
Add					
Remove					

Tan 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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provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	

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	2/29/2024	
The date of each amendment(s)	adoption:, if other than	1 the
date this document was signed.		
	29/2024	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requirements, this date will not be listed a Department of State's records.	s the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
"The number of votes ea	st for the amendment(s) was/were sufficient for approval	
by	**	
	(voting group)	
2/29/202 Dated	ı	
Signature	home Atten	
(By a selec	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	
	Thomas J Frey	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	