## 1721000081283

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(Address)			
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: CULLE'S HOME	INSPECTION SERVICES	INC		
	BER: P210000\$12\$3				
	s of Amendment and fee are su	bmitted for filing.			
Please return all corr	espondence concerning this ma	etter to the following:			
	CHRISTOPHER D. CULLIC	GAN			
	Name of Contact Person				
		Firm' Company			
	6710 NW 84TH AVE				
	DADIEL AND PLANCE	Address			
	PARKLAND FL-33067	<del></del>			
		City/ State and Zip Code	<del>c</del>		
	CULLECULLE976@GMAI				
	E-mail address: (to be u	sed for future annual report	notification)		
For further information	on concerning this matter, plea	se call:			
CHRISTOPHER CU	LLIGAN	at (954	668-0741		
Name of Contact Person		Area Code & Daytime Telephone Number			
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:		
S35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 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			Address Iment Section		
	rision of Corporations  D. Box 6327	Division of Corporations The Centre of Tallahassee			
	), Box 6527 lahassee, FL 32314	2415 N. Monroe Street, Suite \$10			

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

FILED
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CULLE'S HOME INSPECTION SERVICES INC

Check if applicable

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

	SECRETARY OF A LABOR.
(Name of Corporation as curren	tly filed with the Florida Dept. of State SSEE FILE
P21000081283	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corporation:	
EXPERIENCE HOME INSPECTIONS INC	
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS )	
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office ad-	
new registered agent and/or the new registered office addre	<u>555:</u>
Name of New Registered Agent	
(Florida s	treet address)
New Registered Office Address:	. Florida
vew registered Office Address.	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Ager	
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	<u>PT</u>	John Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
<u>X</u> Add	$\underline{SV}$	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove 3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
51 Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Be specific)
<del></del>
<del></del>
<del>-</del>
=-
ange, reclassification, or cancellation of issued shares,
ndment if not contained in the amendment itself:

	option:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date,	
<b>Note:</b> If the date inserted in this bl document's effective date on the De	ock does not meet the applicable statutory filing requirement partment of State's records.	s, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without shareh	older action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes east for the am flicient for approval.	endment(s)
	roved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendmen	
"The number of votes east	for the amendment(s) was/were sufficient for approval	
by		
•	(voting group)	
selected	rector, president or other officer – if directors or officers have . by an incorporator – if in the hands of a receiver, trustee, or ced fiduciary by that fiduciary)	
	CHRISTOPHER D. CULLIGAN	
•	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	