## Pa4000003563

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## COVER LETTER

Division of Corporations NAME OF CORPORATION: H5 HOME SOLUTIONS INC DOCUMENT NUMBER: P24000003563 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: RYAN HAY Name of Contact Person H5 HOME SOULTIONS INC. Firm/ Company 10101 WINDING RIVER RD Address PUNTA GORDA FL 33950 City/ State and Zip Code LAZYBEARSTN@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (\frac{407 569 7598}{\text{Area Code & Daytime Telephone Number}} RYAN HAY Name of Contact Person Enclosed is a cheek for the following amount made payable to the Florida Department of State: □\$52,50 Filing Fee S35 Filing Fee □S43.75 Filing Fee & ☐\$43.75 Filing Fee & Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) Street Address Mailing Address Amendment Section Amendment Section

Division of Corporations P.O. Box 6327

TO: Amendment Section

Tallahassee, FL 32314

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of



H 5 HOME SOULTIONS INC

2024 FEB 21 PM 12 45

> HOME SOULTIONS INC	COCAL CO CI TITIO
(Name of Corporation as currently	v filed with the Florida Dept. of State)
24000003563	64.5.181.6°
(Document Number of	f Corporation (if known)
ursuant to the provisions of section 607,1006, Florida Statutes, this <i>t</i> s Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s
If amending name, enter the new name of the corporation:	
	The new
ame must be distinguishable and contain the word "corporation," "c Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A chartered," "professional association," or the abbreviation "P.A."	ompany," or "incorporated" or the abbreviation "Corp.,"
. Enter new principal office address, if applicable:	
Principal office address <u>MUST BE A STREET ADDRESS</u> )	
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
). If amending the registered agent and/or registered office addr	
new registered agent and/or the new registered office address	<u>i</u>
Name of New Registered Agent	
(Florida str	eet address)
	en 11
New Registered Office Address:	(Civ) , Florida (Zip Code)
	(Carry)
iew Registered Agent's Signature, if changing Registered Agent:	
hereby accept the appointment as registered agent. I am familiar w	
Signature of New Re	egistered Agent, if changing
N 1 (2 1 1 1 1 1	
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>	<u>John De</u>	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	ones .	
X Add	<u>sv</u>	Sally Sr	nith	
Type of Action (Check One)	Title		<u>Name</u>	<u>Addres</u> s
1) Change	P	<b></b>	RYAN HAY	10101 WINDING RIVER RD. PU
_⊀ <sub>Add</sub>				
Remove				
2) Change		_		
Add				
Remove 3 ) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
51 Change		_		
Add				
Remove				
6) Change	··-	_		
Add				
Remove				

Attach additional sheets, if necessar	Articles, enter change(s) he y). (Be specific)			
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	<del></del>			
		<del>.</del>	<u></u>	
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		<u> </u>		
			<u> </u>	
an amendment provides for an e	exchange, reclassification,	or cancellation of issue	ed shares,	
provisions for implementing the a	amendment if not containe	d in the amendment it	<u>iself:</u>	
(if not applicable, indicate N/A	)			
	-			
	·			
· · · · · ·				

The date of each amendment(s) adoption: date this document was signed.	3RUARY 1, 2024	, if other than the
Effective date if applicable:		
<u> </u>	(no more than 90 days after amendment file date)	- <del></del> -
Note: If the date inserted in this block does no document's effective date on the Department of S	t meet the applicable statutory filing requirements, this State's records.	date will not be listed as the
Adoption of Amendment(s) (CHE	ECK ONE)	
The amendment(s) was/were adopted by the in action was not required.	ncorporators, or board of directors without shareholder a	ction and shareholder
☐ The amendment(s) was/were adopted by the s by the shareholders was/were sufficient for ap	hareholders. The number of votes cast for the amendme pproval.	nt(s)
	shareholders through voting groups. The following state group entitled to vote separately on the amendment(s):	ment
"The number of votes cast for the amend	dment(s) was/were sufficient for approval	
by(vatir	ng group)	
Signature  (By a director, presic selected, by an incor appointed fiduciary)  RYAN HAY	dent or other officer – if directors or officers have not beer porator – if in the hands of a receiver, trustee, or other coby that fiduciary)  Typed or printed name of person signing)	en ourt
<del></del>	Fitle of person signing)	