12000098345

(Requestor's Name)
(Address)
(Address)
,
(City/State/Zip/Phone #)
(City/State/Zip/Fitorie #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





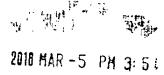
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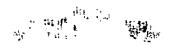


TO: Amendment Section Division of Corporations

NAME OF CORPOR	H2 Innovative Sol	utions, Inc.		
DOCUMENT NUME	P12000098345 BER:			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this ma	tter to the following:		
	Howard Holley			
		Name of Contact Person	1	
	TouchPoint Innovative Solut	ions, Inc.		
		Firm/ Company		
	520 Palm Coast Parkway SW, Suite 201			
	Palm Coast, FL 32137	Address		
		City/ State and Zip Cod	e	
	admin@holleygrouplic.com			
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	n concerning this matter, pleas	se call:		
Howard Holley		386	283-5906	
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)	
Malling Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



2018 MAR -5 PH 3:5:

(Name o	of Corporation as current	ly filed with the Florida Dept. of State)
P12000098345		
	(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607. ts Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new na	me of the corporation:	
TouchPoint Innovative Solutions, Inc.		The new
name must be distinguishable and con. "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
C Eutonomoradostas I aktis a dela con	##L1	N/A
B. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>)		
		
		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A
(Mutting dada ess MAT DE AT 031)	OFFICE BOX	
). If amending the registered agent an	d/or registered office add	ress in Florida, enter the name of the
new registered agent and/or the new		
Name of New Registered Agent	N/A	
	(Florida st	reet address)
New Registered Office Address:	N/A	. Florida
New Registered Office Address.		(City) (Zip Code)
New Registered Agent's Signature, if c	hanging Registered Agen	<u>:</u>
hereby accept the appointment as regist	ered agent. I am familiar	with and accept the obligations of the position.

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>	Mike Jones	
X Add	<u>sv</u>	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			
5) Change			
Add	 		
Remove			
6) Change	 .		
Add			
Remove			

A	ets, if necessary).	cles, enter change(s) h (Be specific)	_	
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<u>lf an amendment pr</u>	<u>ovides for an exch</u>	inge, reclassification,	<u>or cancellation of issue</u> c	l shares,
		dment if not containe	d in the amendment itse	<u>elf:</u>
(ij not applicabl	le, indicate N/A)			
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	reoruary 28, 2018	
The date of each amendment(s) adoption:	, if other than the
date this document was signed.		
	March 1, 2018	
Effective date <u>if applicable</u> : _		
	(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, t Department of State's records.	his date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the amenda sufficient for approval.	ment(s)
	approved by the shareholders through voting groups. The following so for each voting group entitled to vote separately on the amendment(s)	
	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
	adopted by the board of directors without shareholder action and share	eholder
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and sharehold	ler
Dated Signature (By sele	a director, president or other officer – if directors or officers have not cted, by an incorporator – if in the hands of a receiver, trustee, or othe ointed fiduciary by that fiduciary) Howard M. Holley, Sr (Typed or printed name of person signing)	
	President and CEO	
	(Title of person signing)	