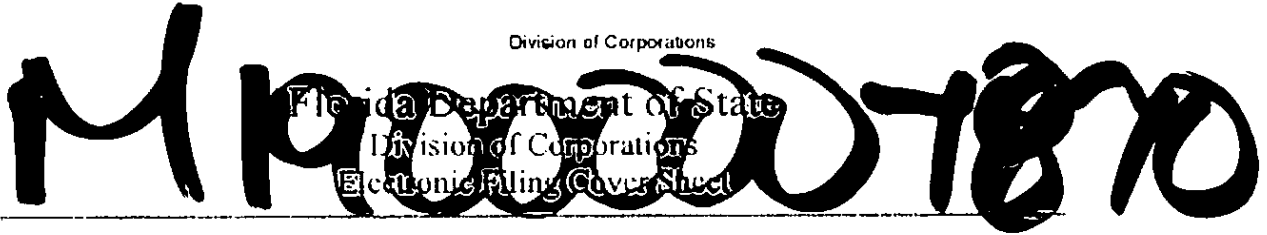


10/9/2019

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H19000300985 3))



H190003009853ABC2

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To:
 Division of Corporations
 Fax Number : (850)617-6383

From:
 Account Name : C T CORPORATION SYSTEM
 Account Number : FCA000000023
 Phone : (614)280-3338
 Fax Number : (954)208-0845

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

2019 OCT 10 PM 4:21

2019 OCT 10 7:10:44

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
POINTFIRST CAPITAL LLC

Certificate of Status	0
Certified Copy	1
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Estimated Charge	\$55.00

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7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

<u>Title/Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Member	ASCENTIUM CAPITAL LLC	23970 HWY 59 N	<input type="checkbox"/> Add
		KINGWOOD, TX 77339	<input checked="" type="checkbox"/> Remove
Member	PointFirst Solutions LLC	365 W Passaic Street, Suite 225	<input checked="" type="checkbox"/> Add
		Rochelle Park, NJ 07662	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

2019 OCT 10 PM 10:44

RECEIVED

9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

Robert C. Neagle

Signature of the authorized representative

Robert C. Neagle, Manager signing on behalf of member, PointFirst Solutions LLC

Typed or printed name of signee

Filing Fee: \$25.00