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(Re	equestor's Name)			
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(Bu	usiness Entity Name)			
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COVER LETTER

TO: Amendme	nt Section Division of Corporatio	ons	
SUBJECT: Fullsee	ppe, Inc.		
	Name	of Corporation	
DOCUMENT NU	MBER:		
The enclosed Ame	ndment and fee are submitted for	filing.	
Please return all co	rrespondence concerning this mat	tter to the following:	
John MacSweeney			
	Name of Contact Person		
Alithya USA, Inc			
	Firm/Company		
2500 Northwinds I	Parkway, STE 600		Š
	Address		
Alpharetta, GA 30	009		
	City/State and Zip Code		
john.macsweeney@	Jalithya.com		
E-mail addre	ss: (to be used for future annual re	port notification)	
For further informa	ition concerning this matter, pleas	e call:	
John MacSweeney		781 451-1310 at ()	
Name	of Contact Person	Area Code & Daytime	Felephone Number
Enclosed is a check	for the following amount:		
\$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & Certified Copy	□ \$52.50 Filing Fee, Certificate of Status Certified Copy

Mailing Address:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Ft. 32314 Street Address:

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

PROFIT CORPORATION

PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607,1504, F.S.)

SECTION 1 (1-3 MUST BE COMPLETED)

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(Document number of corporation (if known)
Fullscope, Inc.	
•	ration as it appears on the records of the Department of State)
Delaware	3
(Incorporated under laws	of) (Date authorized to do business in Florida)
	SECTION II
(4-7 COM	MPLETE ONLY THE APPLICABLE CHANGES)
. If the amendment changes the name of the cor incorporation? December 21, 2018	rporation, when was the change effected under the laws of its jurisdiction of
Alithya Fullscope Solutions, Inc.	
(Name of corporation after the amendment, ac not contained in new name of the corporation	dding sulfix "corporation," "company," or "incorporated," or appropriate abbreviation.
(If new name is unavailable in Florida, enter a	Iternate corporate name adopted for the purpose of transacting business in Florida)
6. If the amendment changes the period of c	furation, indicate new period of duration.
6. If the amendment changes the period of c	furation, indicate new period of duration.
6. If the amendment changes the period of c	·
6. If the amendment changes the period of c	duration, indicate new period of duration. (New duration)
	(New duration)
	·
	(New duration) n of incorporation, indicate new jurisdiction.
	(New duration)
7. If the amendment changes the jurisdiction	(New duration) n of incorporation, indicate new jurisdiction. (New jurisdiction)
7. If the amendment changes the jurisdiction ————————————————————————————————————	(New duration) n of incorporation, indicate new jurisdiction. (New jurisdiction) gistered office address in Florida, enter the name of the
7. If the amendment changes the jurisdiction	(New duration) n of incorporation, indicate new jurisdiction. (New jurisdiction) gistered office address in Florida, enter the name of the
7. If the amendment changes the jurisdiction ————————————————————————————————————	(New duration) n of incorporation, indicate new jurisdiction. (New jurisdiction) gistered office address in Florida, enter the name of the
7. If the amendment changes the jurisdiction	(New duration) n of incorporation, indicate new jurisdiction. (New jurisdiction) gistered office address in Florida, enter the name of the ered office address:
7. If the amendment changes the jurisdiction	(New duration) n of incorporation, indicate new jurisdiction. (New jurisdiction) gistered office address in Florida, enter the name of the
7. If the amendment changes the jurisdiction	(New duration) n of incorporation, indicate new jurisdiction. (New jurisdiction) gistered office address in Florida, enter the name of the ered office address: (Florida street address)
7. If the amendment changes the jurisdiction 1. If amending the registered agent and/or registered agent and/or registered agent and/or the new registered Agent Name of New Registered Agent	(New duration) n of incorporation, indicate new jurisdiction. (New jurisdiction) gistered office address in Florida, enter the name of the ered office address: (Florida street address)

Signature of New Registered Agent, if changing

Title/ Capacity	<u>Name</u>	<u>Address</u>	Type of Action
			Remove
			Æemove
			□Add
			Remove
			Remove
			Remove
Attached is a certific of the application to under the laws of wh	eate or document of similar import, the Department of State, by the Secrick it is incorporated.	evidencing the amendment, authentical retary of State or other official having cu	ated not more than 90 days prior to del istody of corporate records in the jurisdi
_	the to Make		
	(Signature of a dim a receiver or other when the success of a dim a receiver or other when the success of a dim a receiver or other when the success of a dim a receiver or other when the success of a dim a receiver or other when the success of a dim a receiver or other when the success of a dim a receiver or other when the success of a dim a receiver or other when the success of a dim a receiver or other when the success of a dim a receiver or other when the success of a dim a receiver or other when the success of a dim a receiver or other when the success of a dim a receiver or other when the success of a dim a receiver or other when the success of a dim a receiver or other when the success of a dim a receiver or other when the success of a dim a receiver or other when the success of a dim a receiver or other when the success of a dim a di	ector, president or other officer - if in the court appointed fiduciary, by that fidu	he hands of ciary)

FILING FEE \$35.00

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "FULLSCOPE, INC.", CHANGING ITS NAME FROM "FULLSCOPE, INC." TO "ALITHYA FULLSCOPE SOLUTIONS, INC.", FILED IN THIS OFFICE ON THE TWENTY-FIRST DAY OF DECEMBER, A.D. 2018, AT 9:34 O'CLOCK A.M.



Authentication: 202599724

Date: 03-17-20

3069281 8100 SR# 20202111765 Name of Delivers
Secretary of Name
Deliber of Compactions
Deliber of 94-31 AM 1278-3413
HTED 49-34 AM 1278-3413
SR 2040-301599 - Die Namber 1966/281

CERTIFICATE OF AMENDMENT TO

THE SEVENTH AMENDED AND RESTATED CERTIFICATE OF INCORPORATION OF

FULLSCOPE, INC.

(Pursuant to Section 242 of the General Corporation Law of the State of Delaware)

Fullscope, Inc., a corporation organized and existing under the General Corporation Law of the State of Delaware (the "Corporation"), does hereby certify:

FIRST: That the amendment to the existing Certificate of Incorporation of the Corporation being effected hereby is to delete Article 1 in its entirety and to substitute in its place the following so that, as amended, Article 1 shall be and read as follows:

"1. The name of the Corporation is: Alithya Fullscope Solutions, Inc."

SECOND: That the board of directors of the Corporation, acting by written consent, advised the stockholder of the Corporation entitled to vote thereon to approve and adopt, and the stockholder of the Corporation entitled to vote thereon, acting by written consent, did so approve and adopt this amendment to the existing Certificate of Incorporation of the Corporation in accordance with the General Corporation Law of the State of Delaware.

THIRD: That this Certificate of Amendment to the Certificate of Incorporation of the Corporation shall be effective on the date of filing this amendment.

[Signature Page to Follow]

IN WITNESS WHEREOF, the Corporation has caused this certificate to be executed this 20th day of December, 2018.

FULLSCOPE, INC.

By: /s/ Paul Raymond
Name: Paul Raymond

Name: Paul Raymond Title: Authorized Officer