



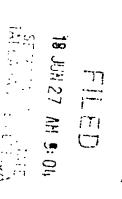


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06/27/18--01019--017 **35.00

And

R. WHITE JUN 2 9 2018



COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATIO	N: TaxResor	urces, Inc.		
DOCUMENT NUMBER: _	K32844			
The enclosed Articles of Ame	undment and fee are su	bmitted for filing.		
Please return all corresponder	nce concerning this ma	tter to the following:		
	Diane Kalir	nowski		
	 	Name of Contact Perso	n	
	MyLLC.co	m, Inc.		
		Firm/ Company	·	
	1910 Tho m	es Ave.		
Address				
	Cheyenne,	WY 82001		
	520,020,	City/ State and Zip Cod	e	
	service@m	ylic.com sed for future annual report	notification)	
L	-man address (10 00 m	ed for turne arman report		
For further information conce	rning this matter, pleas	se call:		
Diane Kalinowski / 1	MyLLC.com, Inc.	at (888) 886-9552	
Name of Contact Person			de & Daytime Telephone Number	
Enclosed is a check for the fo	llowing amount made	payable to the Florida Dep	artment of State:	
•	\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Fiting Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section Division of Corporations		Street Address Amendment Section Division of Corporations Clifton Building		
P.O. Box 6327 Tallahassee, FL 32314			Executive Center Circle	

Tallahassee, FL 32301

FILED

18 JUN 27 AM 5: 04

Articles of Amendment to Articles of Incorporation

SECRETARY DOTAGE TALL AND CONTROL OF TALL

	TaxResources,	Inc.
(Name of	Corporation as currently	lled with the Florida Dept. of State)
	K32844	
	(Document Number of C	Corporation (if known)
Pursuant to the provisions of section 607.10 its Articles of Incorporation:	106, Florida Statutes, this Fi	orida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new man	e of the corporation:	
N/A		The new
name must be distinguishable and conta "Corp.," "Inc.," or Co.," or the designat word "chartered." "professional association	ION COPP. INC. UT C	" "company," or "incorporated" or the abbreviation o". A professional corporation name must contain the A."
		N/A
B. <u>Enter new principal office address, if</u> (Principal office address <u>MUST BE A ST</u>	REET ADDRESS)	
C. Roter new mailing address, if suplic (Malling address MAY BE A POST O	<u>sbie:</u> FF[CE BOX)	600 Coolidge Drive Suite 300
		Folsom, Ca 95630
D. If amending the registered agent and new registered agent and/or the new	Vor registered office address:	ess in Florida, enter the name of the
Name of New Registered Agent	N/A	
	N/A	
	(Florida stre	et oddress)
	N/A	, Florida
New Registered Office Address:		(Zip Code)
New Registered Agent's Signature, if ch	anging Registered Agent:	deb and accept the abligations of the position.
I hereby accept the appointment as registe	erea agent. 🛽 am Jamillar w	of the and accept the obligations of the position.
N/A		
	Signature of New R	egistered 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 PID.

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.

Kxample: X Change	PI John	Doc	
X Remove	<u>V</u> <u>Mike</u>	Jones	
_X Add	SY Sally	Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) X Change	CEO,P,D	Mark D. Olander	4720 Sun Run Lanc
Add			Fair Oaks, CA 95628
Remove			
2) X Change	V,S,D	Jane T Smith	4704 Sun Run Lane
Add			Fair Oaks, CA 95628
Remove			
3) X Change	<u>V,T,D</u>	Nancy Farwell	4720 Sun Run Lane
Add			Fair Oaks, CA 95628
Remove			
4) X Change	v,D	David E Du Val	4704 Sun Run Lane
Add			Fair Oaks, CA 95628
Remove			
5) X Change	COO,D	Jacob Sindt	6815 Poca Montoya Dr
Add			Granite Bay, CA 95746
Remove			
6) X Change	D	Stuart Schwartz	11583 Ragusa Dr
Add			Rancho Cucamonga, CA 91701
Remove			

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 Saily Smith, SV as an Add.

Example: X Change	PT	John Doe	
X Remove	¥	Mike Iones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
71) X Change	_CFΩ	Kurt Lee	1011 Castec Dr.
Add			Sacamento, CA 95864
Remove			
82) <u>X</u> Change	CLO	Zachary VanderKamp	6605 Stonehedge Ct
Add			Granite Bay, CA 95746
Remove			
93) X Change	CDC	Matthew Estes	113 Olympic
Add			Granite Bay, CA 95746
Remove			
4) Change	<u></u>		
Add			
Remove			
5) Change	·		
Add			
Remove			
6) Change			
Add			
Remove			

ttach additional sheets, if necessor	l Articles, enter change(s) here: ary). (Be specific)	
N/A		
		<u> </u>
		_
<u> </u>		
<u> </u>		
if an amendment provides for a providens for implementing th (If not applicable, Indicate h	on exchange, reclassification, or exncellation of insped shares, be amendment if not contained in the amendment itself:	
N/A		
		

The date of each amendment(s) adoption:, if oth	her than the
the date of each amendment(s) scoption:	
Effective data if applicables	
Effective date if applicable: (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be ledocument's effective date on the Department of State's records.	isted as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes east for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 03/27/2018	
Signature	
selected, by an incorporator — if in the hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
Mark D Olander	
Mark D Olander (Typed or printed name of person signing)	
President, Director	
(Title of person signing)	