M18000005537





# Florida Department of State

Division of Corporations
Electronic Filing Cover Sheet

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19 FEB 21 AM 9:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

From:
Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (514)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: ______________________

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

## IVIEW SYSTEMS ULC LLC

| | |
|---|---|
| Certificate of Status | 0 |
| Certified Copy | 1 |
| Page Count | 08 |
| Estimated Charge | $55.00 |

2019 FEB 22 AM 11:23

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K SALY
FEB 22 2019

# APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

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19 FEB 21 AM 9:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**SECTION I (1-4 must be completed)**

1. Name of limited liability Company as it appears on the records of the Florida Department of State: iView Systems ULC LLC

Enter new principal office address, if applicable: ______

***(Principal office address MUST BE A STREET ADDRESS)***

Enter new mailing address, if applicable: ______

***(Mailing address MAY BE A POST OFFICE BOX)***

2. The Florida document number of this limited liability company is: M18000005537

3. Jurisdiction of its organization: British Columbia, Canada

4. Date authorized to do business in Florida: June 8, 2018

**SECTION II (5-9 complete only the applicable changes)**

5. New name of the limited liability company: Omnigo Software International ULC LLC
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

______

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

6. If amending the registered agent and/or registered officer address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: ______

New Registered Office Address: ______
*Enter Florida Street Address*

______, **Florida** ______
*City* *Zip Code*

New Registered Agent's Signature, if changing Registered Agent:
*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

______
If Changing Registered Agent, Signature of New Registered Agent

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:

_______________________________________________

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| Title/ Capacity | Name | Address | Type of Action |
|---|---|---|---|
| ______ | ______ | ______ | ☐ Add |
| | | ______ | ☐ Remove |
| ______ | ______ | ______ | ☐ Add |
| | | ______ | ☐ Remove |
| ______ | ______ | ______ | ☐ Add |
| | | ______ | ☐ Remove |
| ______ | ______ | ______ | ☐ Add |
| | | ______ | ☐ Remove |
| ______ | ______ | ______ | ☐ Add |
| | | ______ | ☐ Remove |

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.

_______________________________
Signature of the authorized representative

Bobby G. Robertson, Jr.
_______________________________
Typed or printed name of signee

**Filing Fee: $25.00**

BRITISH COLUMBIA

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

*BUSINESS CORPORATIONS ACT*

*I Hereby Certify that* the documents annexed hereto and relating to **OMNIGO SOFTWARE INTERNATIONAL ULC** are true copies of the documents on file with the Registrar of Companies.

*Issued under my hand and Seal of Office*
*at Victoria, British Columbia,*
*on December 28, 2018*

**CAROL PREST**
*Registrar of Companies*
PROVINCE OF BRITISH COLUMBIA
CANADA

DUPLICATE

Number: BC1143664

BRITISH
COLUMBIA

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

# CERTIFICATE
# OF
# CHANGE OF NAME

*BUSINESS CORPORATIONS ACT*

I Hereby Certify that IVIEW SYSTEMS ULC changed its name to OMNIGO SOFTWARE INTERNATIONAL ULC on October 30, 2018 at 12:45 PM Pacific Time.

*Issued under my hand at Victoria, British Columbia*
*On October 30, 2018*

**CAROL PREST**
*Registrar of Companies*
Province of British Columbia
Canada

FILED
19 FEB 21 AM 9:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Date and Time: December 28, 2018 09:11 AM Pacific Time

BRITISH COLUMBIA | BC Registry Services

Mailing Address:
PO Box 9431 Stn Prov Govt
Victoria BC V8W 9V3
www.corporateonline.gov.bc.ca

Location:
2nd Floor - 940 Blanshard Street
Victoria BC
1 877 526-1526

# Notice of Articles

*BUSINESS CORPORATIONS ACT*

*This Notice of Articles was issued by the Registrar on: October 30, 2018 12:45 PM Pacific Time*

*Incorporation Number:* **BC1143664**

*Recognition Date and Time: December 4, 2017 03:12 PM Pacific Time as a result of an Amalgamation*

## NOTICE OF ARTICLES

**An unlimited liability company must set out on the face of each share certificate the following statement:**

**"The shareholders of this company are jointly and severally liable to satisfy the debts and liabilities of this company to the extent provided in section 51.3 of the Business Corporations Act."**

**Name of Company:**

OMNIGO SOFTWARE INTERNATIONAL ULC

### REGISTERED OFFICE INFORMATION

**Mailing Address:**
2200 HSBC BUILDING
885 WEST GEORGIA STREET
VANCOUVER BC V6C 3E8
CANADA

**Delivery Address:**
2200 HSBC BUILDING
885 WEST GEORGIA STREET
VANCOUVER BC V6C 3E8
CANADA

### RECORDS OFFICE INFORMATION

**Mailing Address:**
2200 HSBC BUILDING
885 WEST GEORGIA STREET
VANCOUVER BC V6C 3E8
CANADA

**Delivery Address:**
2200 HSBC BUILDING
885 WEST GEORGIA STREET
VANCOUVER BC V6C 3E8
CANADA

## DIRECTOR INFORMATION

**Last Name, First Name, Middle Name:**
Robertson, Bobby G.

**Mailing Address:**
7625 S. HOWELL AVENUE
OAK CREEK WI 53154
UNITED STATES

**Delivery Address:**
7625 S. HOWELL AVENUE
OAK CREEK WI 53154
UNITED STATES

## AUTHORIZED SHARE STRUCTURE

| | | | |
|---|---|---|---|
| 1. | No Maximum | Common Shares | Without Par Value<br><br>Without Special Rights or Restrictions attached |

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Location:
2nd Floor - 940 Blanshard Street
Victoria BC
1 877 526-1526

# Notice of Alteration
# For a BC Unlimited Liability Company

*FORM 11U*
*BUSINESS CORPORATIONS ACT*
*Sections 257 and 51.11*

| | |
|---|---|
| *Filed Date and Time:* | **October 30, 2018 12:45 PM Pacific Time** |
| *Alteration Date and Time:* | **Notice of Articles Altered on October 30, 2018 12:45 PM Pacific Time** |

## NOTICE OF ALTERATION

**Incorporation Number:**
BC1143664

**Name of Company:**
IVIEW SYSTEMS ULC

**Name Reservation Number:**
NR6592086

**Name Reserved:**
OMNIGO SOFTWARE INTERNATIONAL ULC

**ALTERATION EFFECTIVE DATE:**

The alteration is to take effect at the time that this application is filed with the Registrar.

**CHANGE OF NAME OF COMPANY**

**From:**
IVIEW SYSTEMS ULC

**To:**
OMNIGO SOFTWARE INTERNATIONAL ULC