## POODODO95444

: (Re	equestor's Name)	
(Ac	idress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	» #)
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(Do	ocument Number)	
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Amend

THAY 21 AH 9: 14
SECRETARY OF STATE
AND AHASSEE FLOORING

MAY 23 2012 T. ROBERTS

## COVER LETTER,

TO: Amendment Section

Division of Corp	orations		
NAME OF CORPO	RATION: Innovative	Financial Solution	ons, Inc.
DOCUMENT NUM	BER: P0000009544	4	
The enclosed Articles	of Amendment and fee are su	omitted for filling.	
Please return all corre	espondence concerning this ma	tter to the following:	
	Michael J. Freed	man	
		Name of Contact Person	n
	Innovative Finance	cial Solutions, In	C
		Firm/ Company	
	21665 Marigot D	rive	
		Address	
	Boca Raton, FL 3	·····	
		City/ State and Zip Cod	e
mjf	freedman1@yaho	o.com	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
Michael J. Fi	reedman	<sub>at (</sub> 561	558-9064
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or 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)
	iling Address		Address
	Amendment Section Amendment Section Division of Corporations Division of Corporations		
	. Box 6327		Building
Tall	lahassee, FL 32314		xecutive Center Circle
		i allana	issee, FL 32301

## Articles of Amendment Articles of Incorporation

## Innovative Financial Solutions, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

P00000095444

ment(s) to

(Documen	nt Number of Corporation	ı (if known)	AHASSEE FI	STATE
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, th	is <i>Florida Profit C</i>	orporation adopts the follo	wing amendme
A. If amending name, enter the new na	ame of the corporation:			
N/A				The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or	"Co". A profess.	or "incorporated" or the ional corporation name m	e abbreviation ust contain the
B. Enter new principal office address,	if applicable:	N/A		
(Principal office address <u>MUST BE A S</u>				<del></del> -
		<u> </u>		<del>_</del>
C. Enter new mailing address, if applications (Mailing address MAY BE A POST)		N/A		
D. If amending the registered agent an new registered agent and/or the new			enter the name of the	
Name of New Registered Agent	N/A	<del></del>		
Nume of New Registered Agent				
	(Florida	street address)	<del></del>	
New Registered Office Address:	N/A		, Florida	
new Registered Office Madress.	(Ci	(עם	(Zip Code)	<del></del>
New Registered Agent's Signature, if c	hanging Registered Age ered agent. I am familia	nt: W/A ir with and accept t	he obligations of the position	on.
Sig	gnature of New Registere	d Agent, if changin	<u></u>	

If amending the Officer's 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 <math>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>	Name	<u>Addres</u> s
1) Change Add Remove	<u>D,V</u>	Shera O. Freedman	21665 Marigot Drive Boca Raton, FL 33428
2) Change Add Remove			
3 ) Change Add Remove	<del></del>		
4)Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

E. If amending or adding additional Artic (attach additional sheets, if necessary).	(Be specific)
N/A	
	1 2 2 4 4 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
	•
	· , , , , , , , , , , , , , , , , , , ,
F. If an amendment provides for an exchaprovisions for implementing the amen (if not applicable, indicate N/A)  N/A	ange, reclassification, or cancellation of issued shares, idment if not contained in the amendment itself:

The date of each amendment(s) adoption: May 14, 2012	
Effective date <u>if applicable</u> :	
<del></del>	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE) .
☐ The amendment(s) was/were adop by the shareholders was/were suf	pted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.
☐ The amendment(s) was/were appromust be separately provided for a	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes east t	for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
action was not required.	pted by the board of directors without shareholder action and shareholder pted by the incorporators without shareholder action and shareholder
Dated May 14	I, <b>2012</b>
Signature Mic	hell Treedman.
(By a di	rector, president or other officer - if directors or officers have not been
	l, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)
	Michael J. Freedman
-	(Typed or printed name of person signing)
	Director/ President
•	(Title of person signing)