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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: 24/7 SOFTWARE	, INC.				
DOCUMENT NUM	D07000010204					
The enclosed Articles	s of Amendment and fee are su	bmitted for filing.				
Please return all corre	espondence concerning this ma	tter to the following:				
	Gerald K. Hwasta					
		Name of Contact Persor	1			
	24/7 SOFTWARE, INC.					
		Firm/ Company				
	6909 SW 18th Street, Suite 301					
	Address					
	Boca Raton, FL 33433					
	-	City/ State and Zip Code	e			
		•				
	F-mail address: (to be u	sed for future annual report	natification)			
	L-man address. (to be u.	sed for fature animar report	notification)			
For further information	on concerning this matter, plea	se call:				
0 1111		***	40. 440.			
Gerald Hwasta		at (
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:			
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing 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 P.O. Box 6327		Amend Divisio	Address Iment Section on of Corporations entre of Tallahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

Articles of Amendment Articles of Incorporation

24/7 SOFTWARE, INC.					
(Name o	of Corporation as curren	tly filed with the Florida Dept. of Sta	ite)		
P07000010394					
	(Document Number	of Corporation (if known)			
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006. Florida Statutes, thi	s Florida Profit Corporation adopts the	e following amendment(s) to		
A. If amending name, enter the new n	ame of the corporation:				
			The new		
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	Corp," "Inc," or "Co".	A professional corporation name mi	abbreviation "Corp.,"		
R. Fater new principal office address	if annlicable:	6909 SW 18th Street			
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		Suite 301			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		Boca Raton, FL 33433	202		
		6909 SW 18th Street	JO JAN		
		Suite 301	6 % O , 6 %		
		Boca Raton, FL 33433			
D. If amending the registered agent an new registered agent and/or the new			<u>ne</u>		
	Gerald K. Hwasta				
Name of New Registered Agent	6909 SW 18th Street, Su	ite 301			
	(Florida s	treet address)			
New Registered Office Address:	Boca Raton	. Florid	33433 la		
The state of the s		(City)	(Zip Code)		

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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 Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Do	<u>oe</u>		
X Remove	Y	Mike Jones			
_X Add	<u>sv</u>	Sally Si	mith		
Type of Action (Check One)	<u>Title</u>		<u>Name</u>		<u>Addres</u> s
1) Change	-	_			
Add					
Remove				,	
2) Change		_			
Add					
Remove 3) Change		_			
Add					
Remove					
4) Change		_		;	
Add					
Remove					
5) Change		_			· · · · · · · · · · · · · · · · · · ·
Add					
Remove				-	
6) Change		_			
Add					
Remove					
Page 2 of 4					
E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)					

	
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F. If an amendment provides for an exchange, reclassificate provisions for implementing the amendment if not consider (if not applicable, indicate N/A)	tained in the amendment itself:
Pag	ge 3 of 4
The date of each amendment(s) adoption:	, if other than the
date this document was signed.	. A Other than the
and and an argined.	
Effective date if applicable:	
Effective date if applicable: (no more than	n 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 listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were add by the shareholders was/were su	•	The number of votes cast for the amendment(s)
	-	through voting groups. The following statement to vote separately on the amendment(s):
"The number of votes cast	for the amendment(s) was	/were sufficient for approval
by		·"
	(voting group)	
☐ The amendment(s) was/were add action was not required.	opted by the board of direc	tors without shareholder action and shareholder
The amendment(s) was/were add action was not required.	opted by the incorporators	without shareholder action and shareholder
Dated12/19/2019	•	
selecte		officer – if directors or officers have not been in the hands of a receiver, trustee, or other court (ary)
	Gerald K. Hwasta	
	(Typed or prin	ted name of person signing)
	Chairman & CEO	
	(Title of person signing)	