P12000047344

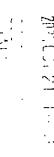
(F	Requestor's Name)	<u> </u>
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PICK-UP	MAIT	MAIL
(E	Business Entity Name)	
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Certified Copies	Certificates of	Status
Special Instructions to	o Filing Officer:	
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10/21/24--01019--021 **35.00



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Paywatch Corporate	tion 		
DOCUMENT NUME	P12000047344			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corres	spondence concerning this ma	tter to the following:		
	Noel Mijares			
		Name of Contact Pe	erson	
	iSoftware			
		Firm/ Company	<u> </u>	
	555 NE 15th Street			
		Address		
	Suite 934-A			
		City/ State and Zip	Code	
	nmijares@isottwarehealth.co	m		
	E-mail address: (to be us		port notification)	
				· ·
For further information	n concerning this matter, pleas	se call:		1
Noel Mijares		at (336-5608 a Code & Daytime Telephone Nur	
Name o	of Contact Person	Area	i Code & Daytime Telephone Nur	nber
Enclosed is a check fo	r the following amount made	payable to the Florida	Department of State:	
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee Certified Copy (Additional copy is enclosed)	Certificate of Status	
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 thassee, F1, 32314	An Di ^c Th 24	reet Address mendment Section vision of Corporations to Centre of Tallahassee 15 N. Monroe Street, Suite 810 llahassee, FL 32303)

Articles of Amendment to Articles of Incorporation of

Paywaten Corporation		h the Florida Dept. of State)	
	on as currently filed wi	in the Florida Dept. of State)	
Paywatch Corporation (Docum	nent Number of Corporat	ion (if known)	
· ·	•		
Pursuant to the provisions of section 607.1006, Florida ts Articles of Incorporation:	a Statutes, this <i>Florida Pi</i>	ofit Corporation adopts the foll	owing amendment
A. If amending name, enter the new name of the co Software Corporation	orporation:		
•			The new
name must be distinguishable and contain the word "co "Inc.," or Co.," or the designation "Corp," "Inc, "chartered," "professional association," or the abbre	" or "Co". A professi	or incorporated or the anore must come must co	viation Corp., ontain the word
3. Enter new principal office address, if applicable Principal office address <u>MUST BE A STREET ADI</u>			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	 DX)		
	- -		765
			<u>-:</u>
. If amending the registered agent and/or register	red office address in Flo	rida, enter the name of the	2
new registered agent and/or the new registered		Tital Circle Control Control	
Name of New Registered Agent			· · · · · · · · · · · · · · · · · · ·
Name of New Registered Agent			
	(Florida street address)	<u>-</u> -
New Registered Office Address:		. Florida	
New Registered Office Plantess.	(City)		(Zip Code)
New Registered Agent's Signature, if changing Reg Thereby accept the appointment as registered agent.	istered Agent:		,
Sign	ature of New Registered :	Avent if changing	
Mgm	ана с 19 мен пецыетен г	ц, н. у ониндиц	
Theck if applicable			

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). F.S.

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)

Example:

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.

X Change	<u>PT</u>	John Doc	
X Remove	Y	Mike Jones	
_X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change			···
Add			
Remove			
2) Change	·- · ·		
Add			
Remove Change			7 2
Add			···
Remove			<u></u>
4) Change			<u> </u>
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		<u> </u>	
Add			
Remove			

an amendment provides for an exchange, reclassification, or cancellation of issued shares,	ttach additional sheets, if necessary). (Be specific)		
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	provisions for implementing the amendment if not contained in the amendment itself:		54
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	provisions for implementing the amendment if not contained in the amendment itself:	SA LA	54

The date of each amendment(s) ad	option:	, if other than
date this document was signed.		
Effective date <u>if applicable</u> :	(no more than 90 days after	amendment file date)
Note: If the date inserted in this bl document's effective date on the De	ock does not meet the applicable statuto	ory filing requirements, this date will not be listed as
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ado action was not required.	ited by the incorporators, or board of dire	ectors without shareholder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	sted by the shareholders. The number of ficient for approval.	votes cast for the amendment(s)
☐ The amendment(s) was/were app must be separately provided for	oved by the shareholders through voting ach voting group entitled to vote separat	groups. The following statement tely on the amendment(s):
"The number of votes cast	or the amendment(s) was/were sufficient	. for approval
by		···
	(voting group)	
Dated 10 / 1	6/24	
Signature	sel squee	2000.
(13y ayor selected	ector, president or other officer – if direc by an incorporator – if in the hands of a d fiduciary by that fiduciary)	
	soel Mijares	
	(Typed or printed name of per-	son signing)
	CEO, President	2
	(Title of person signing)	