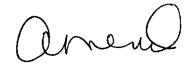
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. (Re	questor's Name)			
(Ad	dress)			
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PICK-UP	☐ WAIT	MAIL		
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(Document Number)				
Certified Copies	_ Certificate:	s of Status		
Special Instructions to Filing Officer:				

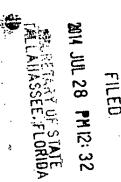
Office Use Only



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8/8/14

COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPOR	ATION: We Help S	Systems Inc.				
	ER: P130000782					
The enclosed Articles of	f Amendment and fee are su	abmitted for filing.				
Please return all corresp	oondence concerning this ma	tter to the following:				
_	Matthew Roberts					
		Name of Contact Person	π			
	We	e Help Systems	Inc.			
Firm/ Company						
	7960 Lakeland Street					
_		Address				
	Jacksonville, Florida 32221					
_		City/ State and Zip Cod	c			
	info@we	helpsystems.co	om			
		sed for future annual report				
For further information	concerning this matter, pleas	se call:				
	ew Roberts	at (_ 904	, 294-6000			
Name of	f Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check for	the following amount made	payable to the Florida Depa	urtment of State:			
▼ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is enclosed)			
Maili	ing Address	Street	Address			
Amendment Section		Amendment Section				
Division of Corporations		Division of Corporations				

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

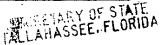
We Help Systems Inc.

2014 JUL 28 PH 12: 32

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

P13000078208

(Document Number of Corporation (if known)



Pursuant to the provisions of section 607,1006. Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered." "professional association." or the abbreviation "P.A." 7960 Lakeland Street, B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Jacksonville, FL 32221 C. Enter new mailing address, if applicable: Not Applicable (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: M.W. Roberts Name of New Registered Agent 7960 Lakeland Street (Florida street address)

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

New Registered Office Address:

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

Signature of New Registered Agent, if changing

Jacksonville (City) 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 Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	D	Tammy Roberts	7960 Lakeland St
Add			Jacksonville, Fl 32221
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
4) Change			
Add			
Remove			
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5) Change Add			
Remove			
Kenove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific) F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:

(if not applicable, indicate N/A)

The date of each amendment(s) adoption: //U1/2014	, if other than the
date this document was signed. 7/01/2014	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	nt(s)
The amendment(s) was/were approved by the shareholders through voting groups. The following state must be separately provided for each voting group entitled to vote separately on the amendment(s):	rment
"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 shareho action was not required.	lder
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 7/15/2014	
Signature Mart III	
(By a director, president or other officer + if directors or officers have not bee selected, by an incorporator + if in the hands of a receiver, trustee, or other co- appointed fiduciary by that fiduciary)	
Matthew Roberts	
(Typed or printed name of person signing)	
Director	
(Title of person signing)	