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C. GOLDEN

APR 2 0 2018

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

Phone: 850-558-1500
ACCOUNT NO. : 12000000195
REFERENCE : 170142 4983A
AUTHORIZATION : Spreak blenow
COST LIMIT : \$ 35.00
ORDER DATE : April 18, 2018
ORDER TIME : 10:54 AM
ORDER NO. : 170142-005
CUSTOMER NO: 4983A
DOMESTIC AMENDMENT FILING  NAME: TVF CLOUD, INC.
EFFECTIVE DATE:
XX ARTICLES OF AMENDMENT RESTATED ARTICLES OF INCORPORATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY  XX PLAIN STAMPED COPY  CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Roxanne Turner EXT# 62969

EXAMINER'S INITIALS:

#### **COVER LETTER**

Division of Corporations NAME OF CORPORATION: TVF Cloud, Inc. **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Kevin L. McNab Name of Contact Person Cozen O'Connor Firm/ Company 1650 Market Street, Suite 2800 Address Philadelphia, PA 19103 City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$43.75 Filing Fee & \$43.75 Filing Fee & \$52.50 Filing Fee \$35 Filing Fee Certificate of Status Certificate of Status Certified Copy Certified Copy (Additional copy is enclosed) (Additional Copy is enclosed)

**Mailing Address** 

TO: Amendment Section

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



## RESUBMIT

Please give original submission date as file date.

## FLORIDA DEPARTMENT OF STATE Division of Corporations

April 19, 2018

CORPORATION SERVICE COMPANY

SUBJECT: TVF CLOUD, INC. Ref. Number: P15000080112

We have received your document for TVF CLOUD, INC. and the authorization to debit your account in the amount of \$35.00. However, the document has not been filed and is being returned for the following:

An individual must sign on behalf of the business entity you have designated as the registered agent.

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information. http://dos.myflorida.com/sunbiz/search/guides/corporation-records/title-abbreviations/

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden Regulatory Specialist II

Letter Number: 218A00007953

2818 APR 19 PH 4: 14
MECRESHEET OF SERVICES

### Articles of Amendment to Articles of Incorporation of

FILED

TVF Cloud, Inc.		2018 A	IPR 18 AM 9: 02
(Name P15000080112	of Corporation as currently	filed with the Florida Dept. of State) R	ETARY OF STATE
	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this F	Florida Profit Corporation adopts the following	lowing amendment(s) to
A. If amending name, enter the new n	ame of the corporation:		
	nation "Corp," "Inc," or "C	" "company," or "incorporated" or to". A professional corporation name to.A."	
B. <u>Enter new principal office address,</u> (Principal office address <u>MUST BE A S</u>			
C. Enter new mailing address, if appl (Mailing address <u>MAY BE A POST</u>		989 Old Eagle School Road, Suite 815 Wayne, PA 19087	
If amending the registered agent an new registered agent and/or the ne		ss in Florida, enter the name of the	
Name of New Registered Agent	Corporation Service Compa	ny	
Thame of New Yorkster ett 71gc/it	1201 Hays Street		<del></del>
	(Florida stree	t address)	
New Registered Office Address:	Tallahassee	, Florida_323	01
	(0	City)	(Zip Code)
New Registered Agent's Signature, if cl hereby accept the appointment as regist		th and accept the obligations of the positi	ion.
	rexame	Duner	Roxanne Turner Asst. Vice Preside
•	Signature of New Reg	gistered Agent, if changing	

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	PT John	n Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	SV Sall	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) X Change	DV	Ian J. Whitman	989 Old Eagle School Road
Add			Suite 815
Remove			Wayne, PA 19087
2) X Change	DV	Paul B. Harrison	989 Old Eagle School Road
Add			Suite 815
Remove			Wayne, PA 19087
3) Change	DCEO	Guy Fardone	989 Old Eagle School Road
X Add	<del></del>		Suite 815
Remove			Wayne, PA 19087
4) Change	DCFOT	Jeffrey D. Coursen	989 Old Eagle School Road
X Add	<del></del>		Suite 815
Remove			Wayne, PA 19087
5) Change	DVS	Michael I. Eisner	989 Old Eagle School Road
X Add			Suite 815
Remove			Wayne, PA 19087
6) Change	ν	Tim Allen	989 Old Eagle School Road
X Add			Suite 815
Remove			Wayne, PA 19087

Type of Action	Title	Name	Address
7) Change	V	Scott Kinka	989 Old Eagle School Road
X Add			Suite 815
Remove			Wayne, PA 19087

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If amending or adding additional Artic (Attach additional sheets, if necessary).	(Be specific)
	,
If an amendment provides for an exchorovisions for implementing the amen (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:

The date of each amendment(s) adoption:, if other than	1 th
date this document was signed.	
Effective date if applicable:	
(no more than 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 document's effective date on the Department of State's records.	s the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"  (voting group)	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
April 18, 2018  Dated	
1-	
Signature /2	
(By a director, president of other officer - if directors or officers have not been	
selected, by an incorporator - if in the hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
JEFFREY D. COURSED	
(Typed or printed name of person signing)	
CFO	
(Title of person signing)	