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R. WHITE

COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: Resolved Investment Solutions INC. DOCUMENT NUMBER: P16000052975 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: **ASHLEY PERRY** Name of Contact Person RESOVLED INVESTMENT SOLUTIONS Firm/ Company 2325 S CONWAY RD UNIT 503 Address ORLANDO FL 32812 City/ State and Zip Code RESOLVEDINVESTMENTS407@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (407) 381-5183

Area Code & Daytime Telephone Number **ASHLEY PERRY** Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) **Street Address Mailing Address** Amendment Section Amendment Section

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations

Tallahassce, FL 32301

2661 Executive Center Circle

Clifton Building

lment Fig. 1

Articles of Amendment to Articles of Incorporation of

16 AUG 26 AH 11: 25

RESOLVED INVESTMENT SOLUTIONS INC.

SECRETARY WESTAME TALLAHASHEE PLUNIDA

	of Corporation as current	ly filed with the Florid	da Dept. of State)
P16000052975			
	(Document Number of	f Corporation (if know	n)
Pursuant to the provisions of section 607 its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corpor	ation adopts the following amendment(s
A. If amending name, enter the new na	ame of the corporation:		
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or	'Co". A professional	Thenew incorporated" or the abbreviation corporation name must contain the
B. Enter new principal office address,			
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS)		
C. Enter new mailing address, if apple (Mailing address MAY BE A POST)			
 If amending the registered agent an new registered agent and/or the ne 			the name of the
	ASHLEY PERRY	<u>ı.</u>	
Name of New Registered Agent		 	
	4443 BEAUMONT DR		
	•	reet address)	22010
New Registered Office Address:	ORLANDO		, Florida
		(City)	(Zip Code)
		(City)	(Zip Code)
New Registered Agent's Signature, if c	hanging Registered Agent	: :	
I hereby accept the appointment as regist	ered agent. I am familiar	with and accept the ob	ligations of the position.
	1	0	
	4. 6.4		
——————————————————————————————————————	surely fe		
	signature oj New I	Registered Agent, if cha	nging ·

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 Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	PT	ASHLEY PERRY	4443 BEAUMONT DR
X Add			ORLANDO FL 32810
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change	···		
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
	- 1 · · · · · · · · · · · · · · · · · ·
	·
f an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
(у ног аррисаоге, таксаге гул)	
	· · · · · · · · · · · · · · · · · · ·

	. 08/19/2016	
The date of each amendment		, if other than th
date this document was signed.		
Essentia deta is ambianhla.	08/19/2016	
Effective date if applicable:	(no more than 90 days after amendment fi	le date)
	his block does not meet the applicable statutory filing requite Department of State's records.	rements, this date will not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes cast for tre sufficient for approval.	the amendment(s)
	e approved by the shareholders through voting groups. The for each voting group entitled to vote separately on the amount	
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/wer action was not required.	e adopted by the board of directors without shareholder action	n and shareholder
The amendment(s) was/wer action was not required.	e adopted by the incorporators without shareholder action and	d shareholder
08/19	2016	
Dated		
Signature	T/luly the	1
	y a director, president or other officer — directors or officer	
	lected, by an incorporator – if in the hands of a receiver, trust pointed fiduciary by that fiduciary)	ee, or other court
u,	pointed reduciary by that reduciary)	
	ASHLEY PERRY	•
	(Typed or printed name of person signing)	
	OWNER	
	(Title of person signing)	