

| (Requestor's Name)                      |
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| (Business Entity Name)                  |
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S. YOUNG

## COVER LETTER

**TO:** Amendment Section Division of Corporations

| NAME OF CORPOR   | RATION: JACARAS HOLD                        | INGS INC  |  |
|--|---|---|--|
| DOCUMENT NUME  | P16000100820                                | <del></del>   | <del></del>  |
| The enclosed Articles  | of Amendment and fee are su                 | bmitted for filing.   |  |
| Please return all corres   | spondence concerning this ma                | tter to the following:  |  |
|  | MYLES SMITH                                 |   |  |
|  |   | Name of Contact Person  | 1  |
|  | TOUCH TECH LLC                              |   |  |
|  |   | Firm/ Company   | <del></del>  |
|  | 4630 S. KIRKMAN RD. # 1                     | 71  |  |
|  | · · · · · · · · · · · · · · · · · · ·       | Address   |  |
|  | ORLANDO FL 32811                            |   |  |
|  |   | City/ State and Zip Cod   | e  |
| MDS  | MIF@GMAIL.COM                               |   |  |
| <del></del>  | E-mail address; (to be us                   | sed for future annual report                                      | notification)  |
|  |   |   |  |
| For further information  | n concerning this matter, pleas             | se call:  |  |
| MYLES SMITH  |   | at (  | 745-5335<br>de & Daytime Telephone Number  |
| Name of Contact Person   |   | Area Co   | de & Daytime Telephone Number  |
| Enclosed is a check fo   | r 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 Tallahassee, FL 32314 |   | Ameno<br>Divisio<br>Cliftor                                       | Address  Iment Section on of Corporations a Building Executive Center Circle           |

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

to

JACARAS HOLDINGS INC

| (Name of Corporation as currently  | filed with the Florida Dept. of State)                                      |
|--|---|
| P16000100820   |   |
| (Document Number of C  | Corporation (if known)  |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this Fits Articles of Incorporation:   | forida Profit Corporation adopts the following amendment(s)                 |
| A. If amending name, enter the new name of the corporation:  |   |
| name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Coword "chartered," "professional association " or the abbreviation "P  B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | )". A professional corporation name must contain the                        |
| D. If amending the registered agent and/or registered office addresses new registered agent and/or the new registered office address:  | ss in Florida, enter the name of the  |
| Name of New Registered Agent   |   |
| (Florida stree   | to the same   |
|  |   |
| New Registered Office Address: (C  | 'ity) (Zip Code)  |
| New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar wi   | th and accept the obligations of the position.  sistered 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 PID.

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, 5V as an Add.

| Example:<br><u>X</u> Change   | <u> 174</u>  | John Doe    |                |
|-------------------------------|--------------|-------------|----------------|
| X Remove                      | <u>V</u>     | Mike Jones  |                |
| X Add                         | <u>SV</u>    | Sally Smith |                |
| Type of Action<br>(Check One) | <u>Title</u> | <u>Name</u> | <u>Address</u> |
| 1) Change                     |              |             |                |
| Add                           |              |             |                |
| Remove                        |              |             |                |
| 2) Change                     |              |             |                |
| Add                           |              |             |                |
| Remove                        |              |             |                |
| 3 ) Change                    | <del> </del> | _           |                |
| Add                           |              |             |                |
| Remove                        |              |             |                |
| 4) Change                     |              |             |                |
| Add                           |              |             |                |
| Remove                        |              |             |                |
| 5) Change                     |              |             |                |
| Add                           |              |             |                |
| Remove                        |              |             |                |
| 6) Change                     | _            |             |                |
| Add                           |              |             |                |
| Remove                        |              |             |                |

| If amendia<br>(Attach add | ing or adding additional Articles, enter change(s) here:<br>lditional sheets, if necessary). (Be specific) |                          |
|---------------------------|--|--------------------------|
| mend Artic                | ele IV to: Ownerships has been changed. Jacaras Holdings Inc is now 100% owne                              | ed and is a wholly owned |
| ıbsidiary of              | f Touch Tech LLC.  |                          |
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|                           |  |                          |
| If an ame                 | endment provides for an exchange, reclassification, or cancellation of issued s                            | hares,                   |
| provision                 | ons for implementing the amendment if not contained in the amendment itself                                | <u>:</u>                 |
| − (grπe<br>/A             | ot applicable, indicate N/A)   |                          |
| A                         |  |                          |
|                           |  |                          |
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|                           |  |                          |

| The date of each amendmen                            | September 5, 2018<br>t(s) adoption:   | , if other than the                        |
|--|---|--|
| date this document was signed                        |   | , ,  |
|  | September 5, 2018   |  |
| Effective date <u>if applicable</u> :                | (no more than 90 days after amendment file de   | ate)                                       |
|  | this block doe, not meet the applicable statutory filing requirem he Department of State's records.   | nents, this date will not be listed as the |
| Adoption of Amendment(s)                             | ( <u>CHECK ONE</u> )  |  |
|  | re adopted by the shareholders. The number of votes cast for the agree sufficient for approval.   | amendment(s)                               |
| ☐ The amendment(s) was/we must be separately provide | re approved by the shareholders through voting groups. The follored for each voting group entitled to vote separately on the amenda   | wing statement<br>ment(s);                 |
|  | s cast for the amendment(s) was/were sufficient for approval  |  |
| by   | (voting group)  |  |
|  | (voting group)  |  |
| action was not required.                             | ere adopted by the board of directors without shareholder action an   |  |
| action was not required.                             | •   |  |
| Septe<br>Dated                                       | ember 5, 2018   |  |
| Signature  | mo los  |  |
| (1<br>8  | By a director, president or other officer – if directors or officers ha<br>elected, by an incorporator – if in the hands of a receiver, trustee,<br>ppointed fiduciary by that fiduciary) |  |
|  | Myles D. Smith  |  |
|  | (Typed or printed name of person signing)   | ,  |
|  | Vice President/Chief Financial Officer  |  |
|  | (Title of person signing)   |  |