P17000038424

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COVER LETTER

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

CAMP POR 10 PAR 12. **Division of Corporations** NAME OF CORPORATION: CPAY, Inc. DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Vincent Traweek Name of Contact Person CPAY, Inc Firm/ Company 9073 Caribbean Dr Address Pensacola, FL 32506 City/ State and Zip Code info@perswipe.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (850) 380-8300

Area Code & Daytime Telephone Number Vincent Traweek 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 enclosed) (Additional Copy is enclosed) **Mailing 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

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CPAY, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P17000038424 (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: Synergy Merchant Solutions, Inc. 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." 9073 Caribbean Dr B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Pensacola, FL 32506 C. Enter new mailing address, if 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: Name of New Registered Agent (Florida street address) New Registered Office Address: . Florida New Registered Agent's Signature, if changing Registered Agent: 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

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 hold. 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 Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change				
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		-		
Add				
Remove				
6) Change		_	<u> </u>	
Add				
Remove				

ttach additional sheets, if necessary).	ticles, enter change(s) here: . (Be specific)
f an amendment provides for an exc	change, reclassification, or cancellation of issued shares,
provisions for implementing the amo	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
(ij not applicable, indicate N/A)	
(if not applicable, indicate N/A)	

The date of each amended date this document was significant.		, if other than the
Effective date if applical	ble: (no more than 90 days after amendment file date)	
	d in this block does not meet the applicable statutory filing requirements, this date will on the Department of State's records.	not be listed as the
Adoption of Amendmen	t(s) (<u>CHECK ONE</u>)	
	s/were adopted by the shareholders. The number of votes cast for the amendment(s) as/were sufficient for approval.	
	s/were approved by the shareholders through voting groups. The following statement ovided 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)	
☐ The amendment(s) was action was not required	s/were adopted by the board of directors without shareholder action and shareholder d.	
The amendment(s) was action was not required	s/were adopted by the incorporators without shareholder action and shareholder d.	
Dated_	4/4/2018 W + Short	
Signatu	(By a director, president or 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)	_
	Vincent Traweek	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	