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## COR AMND/RESTATE/CORRECT OR O/D RESIGN THOMAS SOLTIONS INC.

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## COVERLETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: \_\_ THOMAS SOLTIONS INC. DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concorning this matter to the following: SAL ABECASIS Name of Contact Person ALLSTATE CORPORATE SERVICES CORP. Firm/Company 2215 HENDRICKSON STREET, SUITE 1 Address BROOKLYN, NY 11234 City/ State and Zip Code FILING@ACS123.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: NAOMI OSTOPOWITZ 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 Certificate of Status Certified Copy Certified Copy (Additional copy is enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

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## Articles of Amendment to Articles of Incorporation of

THOMAS SOLTIONS INC. (Name of Corporation as currently filed with the Florida Dept. of State) P18000096199 (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: THOMAS 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." 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) 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 (City) 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 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.

X Change	PT Is	uhn Doe	
X Remove	Y M	like Jones	
X Add	<u>sv</u> s	ally Smith	•
Type of Action (Check One)	Title	Name	Address
1) Change			
Add			
Remove			
2) Change			-
Add			<del></del>
Remove			
3) Change			
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Remove			<del></del>
4) Change			
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5) Change			
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6) Change			
Add			<del></del>
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Attach additional sheets, if necessary).	ticles, enter change(s) here: (Be specific)
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fan amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, andment )f not contained in the amendment itself:

The date of each amendment(s) date this document was signed.	adoption:	, if other than the
Effective date if applicable:		
<u></u>	(no more than 90 days after amendment file date)	<del></del>
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this date with Department of State's records.	Il not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	et for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder	
12/04/20	18	
Dated		
Signature	De De la	
selec	director, president or other officer — if directors or officers have not been ed, by an incorporator — if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)	•
	DAVID SUSS	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	