# P20000093125

(R	Requestor's Name)	
(A	ddress)	
(A	ddress)	
(C	City/State/Zip/Phone #	·)
PICK-UP	☐ WAIT	MAIL
(E	Business Entity Name	)
(C	Ocument Number)	
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### Sunshine State Corporate Compliance Company

## 3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 02/26/2021		**WALK IN
FNTITY NAME CONTO	JR ON COMMAND INC.	** * ***
LIVIAN I IVIM IN	· · · · · · · · · · · · · · · · · · ·	
DOCUMENT NUMBER_		
	**PLEASE FILE THE ATTACHED AND RETURN**	
XXXX	Plain Copy	AR THE W
	Certified Copy	
<del></del>	Certificate of Status	
	LEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY**  Certified Copy of Arts & Amendments  Certificate of Good Standing	
	**APOSTILLE' / NOTARIAL CERTIFICATION**	
COUNTRY OF DESTINATI		-
NUMBER OF CERTIFICAT	ES REQUESTED	
TOTAL OWED \$35.00	ACCOUNT #: I20160000072	
Please call Time at the	e above number for any issues or concerns. Thank you so m	a h /
1 veuse cuit 1 ma ut um	e above number for any issues or concerns. I nank you so m	uch!

### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: Contour on Comm	and Inc.	
	BER: P20000093125		
The enclosed Articles	s of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	LEANA GUZMAN		
		Name of Contact Persor	1
	ZENBUSINESS PBC		
		Firm/ Company	
	5900 BALCONES DR STE	5000	
		Address	
	AUSTIN, TX 78731		
		City/ State and Zip Cod	e
	COMPLIANCE@ZENBUSI	NESS.COM	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
LEANA GUZMAN		at ( <u>844</u>	)
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	S43.75 Fifing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 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 Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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#### Articles of Amendment to Articles of Incorporation of

CONTOUR ON COMMAND INC.

(Name of Corporation	as currently file	d with the Florida D	ept. of State)	)		
P20000093125						
(Documer	nt Number of Corp	poration (if known)				
Pursuant to the provisions of section 607.1006, Florida S its Articles of Incorporation:	Statutes, this <i>Florid</i>	da Profit Corporation	adopts the fe	ollowing an	nendm	ent(s)
A. If amending name, enter the new name of the corp	poration:					
Patient Boost Inc.				****		
name must be distinguishable and contain the word "corp "Inc.," or Co.," or the designation "Corp." "Inc," o "chartered," "professional association," or the abbrevia	or "Co". A proj	any," or "incorporate fessional corporation	d" or the abb name_must	Th previation " contain th	Corn.	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR	<u>eess</u> )					
	<del></del>					
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				231		
(maining datatess <u>MAT BE AT OST OFFICE BOA)</u>	,		<del></del>			
					<del>.</del>	•
			<del>-</del> .		·	1 1
D. If amending the registered agent and/or registered	d office address in	n Florida, enter the r	ame of the	(2) = N (2) = 1	≖ بې	
new registered agent and/or the new registered off	fice address:			73	. 50	
Name of New Registered Agent			<u>-</u>	رندا <sub>ب</sub>		
	(Florida street ad	dress)		<del></del>		
New Registered Office Address:			. Florida			
	(City)		, , , , , , , , , , , , , , , , , ,	(Zip Code	)	
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I a		nd accept the obligati	ons of the po	sition.		
			·			
Signatu	ire of New Registe	red Agent, if changing	3			
Check if applicable  ☐ The amendment(s) is/are being filed pursuant to s. 607	7.0120 (11) (e), F.	S.				

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)

Example:

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	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	Director	Jeff Lopez JR	110009 Alterra Pkway 1706
X Add			Austin, TX 78758
Remove			110009 Alterra Pkway 1706
2) Change	VP	Jeff Lopez JR	Austin, TX 78758
XAdd			
Remove 3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		<del> </del>	
Add			
Remove			<del></del>
6) Change			
Add			
Remove			

Attach additio	or adding additional and sheets, if necessar	y). (Be specific)				
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f an amendr	nent provides for an o	vehanga raalass	ification or sone	olladio – of toured		
provisions fo	or implementing the a	<u>ime</u> ndment if not	contained in the	e amendment itse	snares, lf:	
(if not ap	pplicable, indicate N/A	)				
<del></del>		<del></del>				
·						
		<del></del>				<del>.</del>
					<del></del>	

	02.25.2021	
The date of each amendment(s) date this document was signed.	adoption:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
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 volepartment of State's records.	will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
■ The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without shareholder action a	and shareholder
☐ 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.	
☐ The amendment(s) was/were a must he separately provided for	oproved 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	st for the amendment(s) was/were sufficient for approval	
by		
•	(voting group)	
02.25.20	!I	
Dated	:1 	
Signature	oshua F Centers	
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 nted fiduciary by that fiduciary)	
	Joshua F Centers	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	