Form 424 (Revised 05/11)

Submit in duplicate to: Secretary of State P.O. Box 13697 Austin, TX 78711-3697 512 463-5555

FAX: 512/463-5709

Filing Fee: See instructions



### Certificate of Amendment

This space reserved for office use.

FILED
In the Office of the
Secretary of State of Texas
NOV 04 2015

Corporations Section

#### **Entity Information**

The name of the filing entity is:	
AgendaWise	
State the name of the entity as currently shown of the entity, state the old name and not the new	in the records of the secretary of state. If the amendment changes the name value.
The filing entity is a: (Select the appropriate	entity type below.)
☐ For-profit Corporation	Professional Corporation
☑ Nonprofit Corporation	Professional Limited Liability Company
Cooperative Association	Professional Association
Limited Liability Company	☐ Limited Partnership
The file number issued to the filing enti	ty by the secretary of state is: 801188457
The date of formation of the entity is:	October 29, 2009
	Amendments
(If the purpose of the certificate of amer	Amended Name  adment is to change the name of the entity, use the following statement)
The amendment changes the certificate filing entity. The article or provision is	of formation to change the article or provision that names the amended to read as follows:
The name of the filing entity is: (state the	ne new name of the entity below)

The name of the entity must contain an organizational designation or accepted abbreviation of such term, as applicable.

#### 2. Amended Registered Agent/Registered Office

The amendment changes the certificate of formation to change the article or provision stating the name of the registered agent and the registered office address of the filing entity. The article or provision is amended to read as follows:

Form 424

	Registered Agent or B, but not both. Also complete	te C.)	
A. The registered agent is an organization	On (cannot be entity named above)	by the name of:	
OR  B. The registered agent is an individual	resident of the state whose	e name is:	
Tracy	Marshàll		
The person executing this instrument affirm has consented to serve as registered agent.	Last Name ms that the person designa	Suffix ted as the new registered agent	
C. The business address of the registered agent and the registered office address is:			
4416 Briarwood Ave., # 110-99	Midland	TX 79707	
Sireet Address (No P.O. Box)	City	State Zip Code	
3. Other Added, Altered, or Deleted Provisions			
Other changes or additions to the certificate of formation may be made in the space provided below. If the space provided is insufficient, incorporate the additional text by providing an attachment to this form. Please read the instructions to this form for further information on format.			
Text Area (The attached addendum, if any, is incorporated herein by reference.)			
Add each of the following provisions to reference of the added provision and the ful		n. The identification or	
Alter and of the following and inland	Etha antifacta affamatic	The identification on	
Alter cach of the following provisions of the certificate of formation. The identification or reference of the altered provision and the full text of the provision as amended are as follows:			
Article 3 - Management. Leslie Graves (listed a (listed as Director 2 in the original filing) are no directors to be listed in addition to Tim Dunn ar Midland, TX 79707 and James E. Trainor, III, 4	et directors and have not been e as follows: Tracy Marshall,	Directors since 2013. The two , 4416 Briarwood Avc., # 110-99,	
Delete each of the provisions identified	below from the certificate of	of formation.	

## Statement of Approval

The amendments to the certificate of formation have been approved in the manner required by the Texas Business Organizations Code and by the governing documents of the entity.

# Effectiveness of Filing (Select either A, B, or C.)

A. This document becomes effective when the document is filed by the secretary of state.  B. This document becomes effective at a later date, which is not more than ninety (90) days from the date of signing. The delayed effective date is:  C. This document takes effect upon the occurrence of a future event or fact, other than the passage of time. The 90 <sup>th</sup> day after the date of signing is:  The following event or fact will cause the document to take effect in the manner described below:		
The following event of fact will educe the document to take extent in the mainter described below.		
Execution  The undersigned signs this document subject to the penalties imposed by law for the submission of a materially false or fraudulent instrument and certifies under penalty of perjury that the undersigned is authorized under the provisions of law governing the entity to execute the filing instrument.		
Date: 110415		
Signature of authorized person  Tracy Warshall  Printed or typed name of authorized person (see instructions)		