PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1 Stylesheet Version v1.2 EPAS ID: PAT4988208

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	CHANGE OF NAME

CONVEYING PARTY DATA

Name	Execution Date
QOLPOM, INC.	01/20/2017

RECEIVING PARTY DATA

Name:	PARALLAX HEALTH MANAGEMENT, INC.	
Street Address:	504 W. 29TH ST.	
City:	TUCSON	
State/Country:	ARIZONA	
Postal Code:	85713	

PROPERTY NUMBERS Total: 2

Property Type	Number
Application Number:	14979889
Application Number:	14979742

CORRESPONDENCE DATA

Fax Number: (855)877-7845

Correspondence will be sent to the e-mail address first; if that is unsuccessful, it will be sent

using a fax number, if provided; if that is unsuccessful, it will be sent via US Mail.

Phone: 5152187888

Email: docketing@goodhue.com

Correspondent Name: GOODHUE, COLEMAN & OWENS, P.C.

Address Line 1: 12951 UNIVERSITY AVE

Address Line 2: SUITE 201

Address Line 4: CLIVE, IOWA 50325

ATTORNEY DOCKET NUMBER:	LFCS
NAME OF SUBMITTER:	ASHLYN D. NGUYEN
SIGNATURE:	/ASHLYN D. NGUYEN/
DATE SIGNED:	06/01/2018

Total Attachments: 4

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> PATENT REEL: 046316 FRAME: 0059

504941462

CERTIFICATE OF AMENDMENT

OF

ARTICLES OF INCORPORATION

OF

QOLPOM, INC.

AN ARIZONA CORPORATION

FIRST, the name of the corporation is QOLPOM, Inc., A.A.C. File number 21018139.

SECOND, Article I of the Articles of Incorporation is amended to read as follows:

The name of the corporation shall be Parallax Health Management, Inc.

Dated this 20th day of January, 2017.

Ву:

Joseph Michael Redmond

Président

By:

Calli Bucci

Chief Financial Officer

ARIZONA CORPORATION COMMISSION CORPORATIONS DIVISION

COVER SHEET

<u>USE A SEPARATE COVER SHEET FOR EACH DOCUMENT</u>
** ORDER COPI ES USING A RECORDS REQUEST FORM **

WHAT ARE YO	OU FILING?		
☐ New Entity	Change to existing entity	Re-submission of	rejected filing
ENTITY NAMI	E - give the exact name of the cor	rporation as currently s	shown in A.C.C. records:
EXPEDITED F	PROCESSING?		
✓ YES - add \$	35 to the filing fee	□NO - pay only the	filing fee
	ng fees are listed on the bottom of azcc.gov, under the FAQs.	f each form or on the f	ee schedule on our website,
PAYMENT:			
☐ MOD Acco		amount to deduct:	
Checks or mon abbreviations. C include: no impr handwritten or s Credit cards - r	eail cash. Cash may be used only for in-per ey orders - must be made payable to "Ar hecks must be completely and properly fill inted or preprinted name and address of t stamped names, addresses, or check numb may be used for in-person submittals, and as of good standing. We accept only Visa, N	rizona Corporation Commissi led out, including the amoun he account holder; no imprin pers; temporary checks (new for online corporation annua	It sections. UNACCEPTABLE CHECKS Inted or preprinted check number; It accounts). It all reports, online name reservations, or
REQUIRED -	RETURN DELIVERY OPTION (P	LEASE PRINT CLEARLY	and select only ONE):
	Email address: calli.bucci@qolpom.com	m	
☐ Pick up	Name:		Phone:
☐ Mail	Name:		
	Address:		
	City:	State:	Zip:
	Phone:		
DOCUMENTS V	VILL BE MAILED IF THEY ARE NOT PIC	CKED UP IN A TIMELY MAN	NNER (APPROXIMATELY ONE WEEK)

View current processing times at: www.azco.gov/Divisions/Corporations/document-processing-times.pdf

FOR ARIZONA CORPORATION COMMISSION USE ONLY

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REEL: 046316 FRAME: 0061

DATE:

PICK-UP BY:

DO NOT WRITE ABOVE THIS LINE; RESERVED FOR ACC USE ONLY.

ARTICLES OF AMENDMENT FOR-PROFIT CORPORATION

Read the Instructions CO14i

	ENTITY NAME — give the exact name of the corporation as currently shown in A.C.C. records OOLPOM, Inc.			
A.C	C.C. FILE NUMBER: 21018139			
	the A.C.C. file number on the upper corner o	f filed documents OR on ou	r website at: http://www.azco.gov/Div	isions/Corporations
Dat	e on which the attached amend	lment was adopted	01/20/2017	
Doe	es the amendment provide for a	-	sification or cancellation of No – go to number 5 and	
4.1	implementing the exchange	, reclassification or		es?
4.2	If your answer to number 4 for implementing the excha a separate sheet with the st	nge, reclassification		
	eck one box concerning approva tructions C014i for information		•	eview the
	Approved by incorporators shareholder approval was		rs without shareholder acti shares have been issued- :	
	Approved by shareholders	but not voting grou	ps – complete numbers 5.	1 and 5.2.
	Approved by shareholders	and voting groups	– complete numbers 5.1, 5	5.2, and 5.3.
	Approved by voting group(s) only - complete	numbers 5.1 and 5.3.	
5.1	Shares – list below each class outstanding shares for each more space is needed, check <u>Attachment</u> form C097.	class or series (exa	mple: common stock, 100	shares). If
	COMMON Class:	Series:	Total: 100	
	Class:	Series:	Total:	
	Class:	Series:	Total:	
	Class:	Series:	Total:	
	Class:	Series:	Total:	
	*·***		1 .0.0	1

Arizona Cor Report Composition - Corporations Division REEL: 046316 FRAME: 0062

5.2 Shareholder approval (all blanks must be filled in):

Total votes entitled to be cast	Votes in favor that were sufficient for approval of amendments	Votes against amendments
100	100	0

5.3 Voting Groups - complete each blank below for each voting group. Review the Instructions C014i for information about voting groups. If more space is needed, check this box and complete and attach the <u>Voting Attachment</u> form C089.

Voting Group (class / series)	Total votes in voting group	Indisputable votes at meeting	Votes in favor that were sufficient for approval of amendments	Votes against amendments

6.	A copy of	the corpo	ration's amendn	nent must be	attached to t	hese Articles.
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SI GNATURE:

By checking the box marked "I accept" below, I acknowledge under penalty of perjury that this document together with any attachments is submitted in compliance

with Arizona law.

√ I ACCEPT

Printed Name

CALLI BUCCI

01/23/2017 Date

REQUIRED - check only one:

I am the Chairman of the Board of Directors of the corporation filing this document.	I am a duly-authorized Officer of the corporation filing this document.	I am a duly authorized bankruptcy trustee, receiver, or other court-appointed fiduciary for the corporation filing this document.
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Filing Fee: \$25.00 (regular processing) Mail: Arizona Corporation Commission - Corporate Filings Section Expedited processing – add \$35.00 to filing fee. 1300 W. Washington St., Phoenix, Arizona 85007 All fees are nonrefundable - see Instructions. 602-542-4100 Fax:

Please be advised that A.C.C. forms reflect only the minimum provisions required by statute. You should seek private legal counsel for those matters that may pertain to the individual needs of your business.

All documents filed with the Arizona Corporation Commission are public record and are open for public inspection. If you have questions after reading the Instructions, please call 602-542-3026 or (within Arizona only) 800-345-5819.

REEL: 046316 FRAME: 0063

C014.001