## L05000021171

(Address)  (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:			
(Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	(Re	questor's Name)	
(Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status			
(City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	(Add	dress)	
(City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status			
(City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	(Add	dress)	
PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	Ç	,	
PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status			
(Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	(Cit	//State/Zip/Phone	e #)
(Document Number)  Certified Copies Certificates of Status	PICK-UP	☐ WAIT	MAIL
(Document Number)  Certified Copies Certificates of Status			
(Document Number)  Certified Copies Certificates of Status	(Bus	siness Entity Nan	ne)
Certified Copies Certificates of Status	(24)	mose Linkly itali	,
Certified Copies Certificates of Status			
	(Do	cument Number)	
Special Instructions to Filing Officer:	Certified Copies	Certificates	of Status
Special Instructions to Filing Officer:			
Special Instructions to Filing Officer:			
	Special instructions to I	-iling Officer:	
			ļ

Office Use Only



100047210221

03/07/05--01040--004 \*\*25.00

10/07

SECRETANT OF STATE

## TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Virtual LNK Software and Multimed (Name of Limited Liability Company)	lia Solutions, LLC
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Levi J. Page (Name of Person)	
(Firm/Company)	ZOUS MAR -7 PM 1: 34 TALLAHASSEE, FLORID
2905 Bickley Drive	SEE 7
Apopha Fl. 32712 (City/State and Zip Code)	1: 34 FLORIDA
For further information concerning this matter, please call:	
Levi J. Pase at (407 (Name of Person) at (407 (Area Code	& Daytime Telephone Number)
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$\times \text{Certificate of Status}\$\$ \$55.00 Filing Fee & \text{Certified Copy} \\ (additional copy is \text{certified}\$\$	Certificate of Status & Certified Copy (additional copy is enclosed)

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Virtual LNK Software and Maltimedia Solutions, LLC
(Present Name)
(A Florida Limited Liability Company)

FIRST:	The Articles of Organizat document number LP	ion were filed on 5 <i>中中の</i> ゆンロ	March 3	2005	and assigned	i		
SECOND:	The following amendan liability company:						imited	l
	Company to	name	Shall	be	chan	ged		
	to				- 2	-	-	<b>.</b>
		Virtua	ILNK,	LL	.c	1		
			•			SECR TALLA	2005 H	_
						HASSE	MAR 7	
						El/AAT OF STATE HASSEE, FLORID	<b>R</b>	
Dated _M	arch 03	, _20	05.			RIDA	1: 34	, F
	Len Signatu	lage re of a member or	authorized represe	ntative of a n	nember			
	<u>Levi</u>	Page Typed or	printed name of sig	gnee				

Filing Fee: \$25.00