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Ta:

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: ACCOUNT BOOKKEEPING CORP

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CLICK FRIEND DIGITAL MARKET LLC

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## 414000 26 30483

## **COVER LETTER**

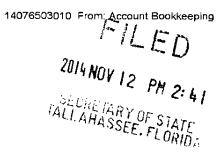
| TO:  | Registration Se<br>Division of Co        |  |   |   |  |  |
|--|--|--|---|---|--|--|
| CLICK FRIEND DIGITAL MARKET LLC  |  |  |   |   |  |  |
| Name of Limited Liability Company  |  |  |   |   |  |  |
| The en   | elosed Articles of                       | Amendment and fee(s) are sul   | omitted for filing.   |   |  |  |
| Please   | teturn all correspo                      | ondence concerning this matter   | to the following:   |   |  |  |
|  |  | MAI  | RCUS ALMEIDA  |   |  |  |
|  |  | **************************************   | Name of Person  | <del></del>   |  |  |
|  |  | CLICK FRII   | END DIGITAL MARKET L  | LC  |  |  |
|  | 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1 |  |   |   |  |  |
|  | 11900 BISCAYNE BLVD SUITE 630            |  |   |   |  |  |
| Address  |  |  |   |   |  |  |
|  | NORTH MIAMI, FL 33181                    |  |   |   |  |  |
|  | City/State and Zip Code                  |  |   |   |  |  |
|  |  |  | IONS@ABKCORP.COM  (to be used for future annual report no           | titication)   |  |  |
| For fur  | ther information c                       | oncerning this matter, please o  | -   |   |  |  |
| ANDREA PINE  |  |  | 898-1757  |   |  |  |
| •  | Name o                                   | f Person   | at () Area Code Daytii  | ne Telephone Number   |  |  |
| Enclose  | ed is a check for th                     | ne following amount:   |   |   |  |  |
| ■ \$2:   | 5.00 Filing Fee                          | □ \$30.00 Filing Fee & Certificate of Status   | □ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | □ \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |  |  |
| MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 |  | STREET/COUR<br>Registration Section Division of Corport Clifton Building<br>2661 Executive Country Tallahassee, FL 3 | orations<br>Center Circle   |   |  |  |

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



| CLICK FRIEND DIGITAL M   |  |  |  |  |
|--|--|--|--|--|
| (Name of the Limited Liability Comp<br>(A Florida Limited  | any as it now appeal<br>Liability Company) | rs on our records.)                            |  |  |
| The Articles of Organization for this Limited Liability Company Florida document number L07000079722                   | y were filed on                            | 08/02/2007 and assigned                        |  |  |
| This amendment is submitted to amend the following:  |  |  |  |  |
| A. If amending name, enter the new name of the limited lial  | bility company he                          | <u>ere</u> :                                   |  |  |
| The new name must be distinguishable and end with the words "Limited Lia   | bility Company," the                       | designation "LLC" or the abbreviation "L.L.C." |  |  |
| Enter new principal offices address, if applicable:  |  |  |  |  |
| (Principal office address MUST BE A STREET ADDRESS)  |  |  |  |  |
|  |  |  |  |  |
| Enter new mailing address, if applicable:  |  |  |  |  |
| (Mailing address MAY BE A POST OFFICE BOX)   |  |  |  |  |
|  |  |  |  |  |
| B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her |  | our records, enter the name of the new         |  |  |
| Name of New Registered Agent:  |  | ·  |  |  |
| New Registered Office Address:   |  |  |  |  |
|  | Enter Florida street address, Florida      |  |  |  |
|  |  |  |  |  |
| •  | City                                       | Zip Code                                       |  |  |

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

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MGR = Manager

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If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

AMBR = Authorized Member <u>Title</u> <u>Name</u> <u>Address</u> Type of Action MGR DE OLIVEIRA, MARCELL \_D Add ■ Remove ALMEIDA, MARCUS V AMBR: 11900 BISCAYNE BLVD SUITE 302 NORTH MIAMI, FL 33181 ☐ Remove □ Add ☐ Remove □ Add ☐ Remove □ Add \_\_ D Remove

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E. Effective date, if other than the date of filing:

(Optional)

(The effective date nine be specific cannot be prior to date of steed date and cornect be more than 40 cays after the date this document is floor by the Plonich Department of State)

Dated

NOVEMBER 05

Signature of a member or sytherized representative of a member MARCUS VALMEIDA - AMBR

Typed or present name of signee

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