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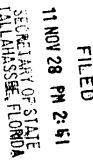
| (Requ | iestor's Name) |) |
|-----------------------------|----------------|-------------|
| (Addr | ess) | |
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| (City/S | State/Zip/Phon | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Busir | ness Entity Na | me) |
| (Docu | ment Number) |) |
| Certified Copies | Certificate | s of Status |
| Special Instructions to Fil | ing Officer: | |
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Office Use Only



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COVER LETTER

| SUBJECT: | GROVE INTERN | NET MARKETING, LLC | ; |
|---------------------------|--|---|--|
| | Name of Limi | ted Liability Company | ······································ |
| | | | |
| The enclosed Articles of | f Amendment and fee(s) are sub | omitted for filing. | |
| Please return all corresp | ondence concerning this matter | to the following: | |
| | | | |
| | | Craig Cook | |
| | | Name of Person | |
| | | r: /0 | |
| | | Firm/Company | |
| | | 303 Smokerise Blvd | |
| | | Address | |
| | LON | NGWOOD FL 32779 US | |
| | | City/State and Zip Code | |
| | craig@ | lacrossesportsnetwork.com to be used for future annual report notif | ication) |
| | | • | loanon's |
| For further information | concerning this matter, please of | 2811 ; | |
| | Craig Cook | | 277-5423 |
| Name | of Person | Area Code & Daytim | e Telephone Number |
| Enclosed is a check for | the following amount: | | |
| \$25.00 Filing Fee | \$30.00 Filing Fee & Certificate of Status | \$55.00 Filing Fee & Certified Copy (additional copy is enclosed | \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| | | | |

MAILING ADDRESS:

Registration Section
Division of Corporations

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

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

11 NOV 28 PM 2: 51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

GROVE INTERNET MARKETING, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

| The Articles of Organization for th | is Limited Liability Company | were filed on | 05/26/2010 | and assigned |
|---|---------------------------------|------------------------------|----------------------------|-------------------------|
| Florida document number | _10000056492 | | | |
| This amendment is submitted to an | nend the following: | | | |
| A. If amending name, enter the | new name of the limited liabi | lity company here: | | |
| | ONLINE SPORTS N | ETWORK, LLC | | |
| The new name must be distinguishab "L.L.C." | e and end with the words "Limit | ed Liability Company | ," the designation "LL | .C" or the abbreviation |
| Enter new principal offices addre | ess, if applicable: | | | |
| (Principal office address MUST B | E A STREET ADDRESS) | | | |
| | | | | |
| | | | | |
| Enter new mailing address, if app | olicable: | | | |
| (Mailing address MAY BE A POS | <u>T OFFICE BOX)</u> | | | |
| | | | | |
| B. If amending the registered registered agent and/or the new r | | | r records, <u>enter th</u> | e name of the new |
| Name of New Registered | Agent: | | | |
| New Registered Office A | ldress: | | | |
| | | 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 608, 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

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

MGR = Manager

| lui – | Managing Member | | |
|----------------|-------------------------------|--|---------------------------------------|
| <u>le</u> | <u>Name</u> | <u>Address</u> | Type of Act |
| | | | |
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| f amen | ding any other information, e | nter change(s) here: (Attach additional shee | ets, if necessary.) |
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| _ | | | |
| d | NOVEMBER 21 | | |
| | | a Mil | |
| | Signature | of a member or authorized representative of a me | mber |
| | | Craig F. Cock Typed or printed name of signee | |

Page 2 of 2

Filing Fee: \$25.00