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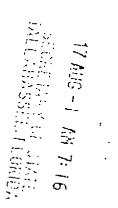
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COVER LETTER

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	VPN Studie	os LLC		
SUBJECT:		Name of Lim	ited Liability Company	
The enclosed	d Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	n all correspo	ondence concerning this matter	to the following:	
		Paula Read Nguyen		
		· · · · · · · · · · · · · · · · · · ·	Name of Person	
		VPN Studios LLC	1 1	
			Firm/Company	
		1334 Tampa Road #157		
			Address	
		Palm Harbor, Florida 346	83	
			City/State and Zip Code	
		Paula@vpnstudios.com		
		E-mail address: (to be used for future annual	report notification)
For further i	nformation c	oncerning this matter, please ca	all:	
Paula Read	Nugyen		727 78	5-0415
	Name o	f Person	Area Code	Daytime Telephone Number
inclosed is	a check for th	ne following amount:		;
] \$25.00 F	Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is end	Certificate of Status &
	Registr Divisio P.O. Bo	ING ADDRESS: ration Section on of Corporations ox 6327 assec, FL 32314	Registrat Division Clifton E	T/COURIER ADDRESS: ion Section of Corporations building
	i dilali	TODOWS FIRE END A TO		see, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

VPN Studios LLC

(Name of the Limited Liability Company as (A Florida Limited Liabil	it now appears on our records.)
The Articles of Organization for this Limited Liability Company were	e filed on 8/10/2012 and assigned
Florida document number L12000103984	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability	company here:
The new name must be distinguishable and contain the words "Limited Liability C	ompany," the designation "L.L.C." 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) 3. If amending the registered agent and/or registered office egistered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	address on our records, enter the name of the nev
	Enter Florida street address
	, Florida
	City Zip Gyle
ew Registered Agent's Signature, if changing Registered Agent:	(i) (ii) (iii) (ii
hereby accept the appointment as registered agent and agree to ovisions of all statutes relative to the proper and complete perficept the obligations of my position as registered agent as proving filed to merely reflect a change in the registered office addinpany has been notified in writing of this change.	Formance of my duties, and I am familiar with and ided for in Chapter 605, F.S. Or, if this document is
If Changing	Registered Agent. Signuture of New Registered Agent

Page 1 of 3

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
			Add
			□ Remove
			Change
		-	Remove
			Change
			Add
			□ Remove
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_		Signature of a mer	wer or authorize	1 Cu				
		Signature of a mer	met of additions	ed representa	i a meme	•		
	Paula Read Nguyen				1			
1								
1		Ty	ped or printed n	ame of signed		•		

Filing Fee: \$25.00