Florida Department of State

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#393 P.002/005

COVER LETTER

TO:	Registration Sectorial Division of Corp				
cub ti	or.	VPNETWO	DRK(, L) (
SUBJI	sc1;		ted Liability Company		
The en	closed Articles of A	mendment and fee(s) are sub	mitted for filing.		
Please	return all correspon	dence concerning this matter	to the following:		
•		En	nily Johns Name of Person	-	
	Calandrino Law Firm, P.A.				
			Firm/Company		
301 E. Pine St., Ste. 950					
			Address	·····	
		Onc	ando, FL 32801		
		400114/06	City/State and Zip Code	`	
		E-mail address: (to	Ton da bysiness aw · Co o be used for future annual report notification	ion)	
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	Emily Jo	nns			
	Name of I	erson .	Area Code & Daytime Te	repnone Number	
Enclose	ed 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 P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

From: Calandrino Law Firm

407 601 4910

01/28/2013 19:12

#393 P.003/005

2013 JAN 29 AM 8: 35

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

.SECRETARY OF STAFFE TALLABASSEE, FLORIDA

VPNETWORKS (Name of the Limited Liability Companion (A Florida	, LLC vas it now appears on our records.)
The Articles of Organization for this Limited Liability Company v. Florida document number <u>L12000154089</u>	•
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	ity company here:
The new name must be distinguishable and end with the words "Limite" L.L.C."	d Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	618 E. South Street, Ste. 500 Orlando, Fl. 32801
(Principal office address MUST BE A STREET ADDRESS)	orlando, FL 32801
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address here.	
Name of New Registered Agent:	
New Registered Office Address:	· Enter Florida street address
	, Florida
New Registered Agent's Signature, if changing Registered Agent;	City Zip Code
I hereby accept the appointment as registered agent and agree the provisions of all statutes relative to the proper and comple accept the obligations of my position as registered agent as pro- being filed to merely reflect a change in the registered office a company has been notified in writing of this change.	te performance of my duties, and I am familiar with and ovided for in Chapter 608, F.S. Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

MGRM = Managing Member

·MGR = Manager

01/28/2013 19:12

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:

Title <u>Name</u> <u>Address</u> Type of Action MGR 618 E. South Street Ste. 500 Benjamin M. Van Pelt Please charge address on proper.

manager as principal solutions of the address address address of the angelouse solutions address add Orlando, FL 32801 Remove

lf am	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
d	January 281 . 2013 .
	Signature of a member or authorized representative of a member
•	PHILIP K. CALANORINO Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00