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SECRETARY OF STATE TALLAHASSEE, FLORID!

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FLORIDA FILING & SEARCH SERVICES, INC.

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NAME:

PK MARKETING GROUP, LLC

TYPE OF FILING: AMENDMENT

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AUTHORIZATION: ABBIE/PAUL HODGE

"DocuSign Envelope ID: 51B8E5AE-2D11-4903-B3CE-8169EA3F0D19 ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

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PK MARKETING GROUP, LLC

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

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|------------------------------------------------------------------------------------------------------------------------------|--------------------|-----------------------------|----------------------|
| The Articles of Organization for this Limited Liability Company | were filed on _M | 1AY 1, 2013 | and assigned |
| Florida document number 113000078820 | | | |
| This amendment is submitted to amend the following: | | | |
| A. If amending name, enter the new name of the limited liab | ility company h | ere: | |
| The new name must be distinguishable and contain the words "Limited Liabil | lity Company," the | designation "LLC" or the at | obreviation "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 here | | n our records, <u>enter</u> | the name of the new |
| Name of New Registered Agent: | | | |
| | | | |
| New Registered Office Address: | Enter Flo | rida street address | |
| | | Florido | |
| | City | , Florida | Zip Code |
| New Registered Agent's Signature, if changing Registered Agent: | | | |
| I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete | performance of | f my duties, and I am j | 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

Docusign Envelope ID: 51B8E5AE-2D11-4903-B3CE-8169EA3F0D19
II amenuing Authorized rerson(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> | <u>Name</u> | Address | Type of Action |
|--------------|-------------------|------------------------------------------------------|----------------|
| MGR | PHILIP A. KOKOSKA | 150 East Robinson Street, #1009 Orlando, FL 32801 | [3] Add |
| | | | Remove |
| | | | Change |
| AMBR | PHILIP A KOKOSKA | 150 East Robinson Street, #1009 Orlando, FL 32801 | |
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