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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : TARLEAF.COM INC Account Number : 120140000084 Phone : (305)541-3980 : (888)772-8108 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN VIRTUALNET DIGITAL AGENCY LLC

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

VIRTUALNET DIGITAL AGENCY LLC		
(Name of the Limited Liability Compa (A Florida Limited I	inv as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on 03/30/2015	and assigned
Florida document number 1.15000056275		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
VIRTUALNET DIGITAL MARKETING WHOLESALE LLC		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Trincipal office wanted to the second of the		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
manny address start interviews of the body		
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B. If amending the registered agent and/or registered o	ffice address on our records, enter	the name of the new
registered agent and/or the new registered office address her		
		o
Name of New Registered Agent:		<u></u>
		9.
New Registered Office Address:	Enter Florida street address	<u> </u>
	emer rioriaa sireei aaaress	> <u>-</u>
	, 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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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>	<u>Name</u>	Address	Type of Action	
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<i>y,</i> () amend	ing any other intormation, enter change(s) here. (Minder addition success, by necessary).)		
			
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E. Effective	date, if other than the date of filing: (optional) we date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to	405 N303 /2 VE	
<u>Note:</u> If the	he date is listed, the date must be specific and cannot be prior to date of filing of more than 90 days after ming.) Furstiant to the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be seffective date on the Department of State's records.	listed as the	1
	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the ea th day after the record is filed.	arlier of:	
Dated JA:	NUARY 13TH . 2020		
			2
	Signature of a member or authorized representative of a member) だ ご
	ROGERIO CALDINI BONFIM		·
	Typed or printed name of signee	- ·.	
	Page 3 of 3	#M 9	Ö
	rage 3 or 3	Sign in the second	