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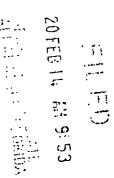
(Requestor's Name)
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COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT:				
SUBJECT		Name of Lim	ited Liability Company	
The enclosed	l Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	indence concerning this matter	to the following:	
		Jon Gress		
			Name of Person	
		IOFILMSCHOOL.COM, I		
			Firm/Company	
		Name of Person IOFILMSCHOOL.COM, LLC Firm/Company 15421 Camp Dubois Crescent Address Winter Garden, FL 34787 City/State and Zip Code jongress@jongress.com E-mail address: (to be used for future annual report notification) nation concerning this matter, please call: Area Code Area Code Daytime Telephone Number Sek for the following amount: g Fee \$30.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Address: ration Section Registration Section on of Corporations Pivision of Corporations		
			Address	
		Winter Garden, FL 34787		
			City/State and Zip Code	
		E-mail address: (to be used for future annual report no	tification)
For further in	iformation c	oncerning this matter, please ca	all:	
Jon Gress				
	Name o	f Person	Area Code Daytir	ne Telephone Number
Enclosed is a	reheck for th	ne following amount:		
□ \$25.00 F	Filing Fee	_	Certified Copy	Certificate of Status & Certified Copy
Re	_	Section	Registration Se	
P.C	D. Box 632	27		
Tal	llahassee, l	FL 32314	2415 N. Monre	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

IOFILMSCHOOL.COM, LLC

(Name of the Limited Liability Comp (A Florida Limited	any as it now appears o Liability Company)	on our records.)	
The Articles of Organization for this Limited Liability Company	were filed on	01/23/2017	and assigned
Florida document numberL17000017366			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited fial	oility company here	2:	
IOVR, LLC			
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the desi	ignation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			·
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			S 71
m			
Enter new mailing address, if applicable:		_ 	
(Mailing address MAY BE A POST OFFICE BOX)			
		T.: *	. <u>.</u>
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our rec	ords, <u>enter the name</u>	of the new regis
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida	a 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 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

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	Membe

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			Change
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fective date, if other than the date of filing: In effective date is listed, the date must be specific and cannot be prior to date of filete: If the date inserted in this block does not meet the applicable statute current's effective date on the Department of State's records.		
record specifies a delayed effective date, but not an effective time, at 12:0 is filed.	01 a.m. on the earlier of: (b) The 90th day aft	er the
ated February 7, 2020		
/N//\ /		

Filing Fee: \$25.00