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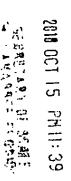
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COVER LETTER

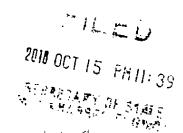
TO: Registration Section Division of Corporations
SUBJECT: VIRTUAL TAIK SOLUTIONS LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Celicia Peeples
Name of Person
Firm/Company
2122 NW 7St Apt, 3
Fl. Lauderdale FL 33311
City/State and Zip Code Code City/State and Zip Code E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Celicia Peeples at (954) 793-3214 Name of Person at (954) Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \text{\$30.00 Filing Fee & Certificate of Status}\$\$ Certified Copy (additional copy is enclosed) \$\Bigcup \text{\$60.00 Filing Fee, Certified Copy (additional copy is enclosed)}\$\$\$ 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Virtual Talk:	<u></u>
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company v Florida document number <u>LISCO ZZ 7.3</u> 67	were filed on $\frac{Q-25-2018}{}$ and assigned
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 contain the words "Limited Liability	ty Company," the designation "LLC" 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)	
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here	fice address on our records, <u>enter the name of the new</u> :
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	Florida

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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
		2122 NU 7St Apl. 3 Tort Lauderdale FL 33311	🖸 Add
/		Turt Lunderclule FL 33311	□ Remove
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			Add
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			_ Remove
			Change

). If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)			
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E. Effective date, if other than the date of filing: 10-5-2018 (optional) (If an effective date is listed the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursua			
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursus Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not document's effective date on the Department of State's records.	ant to 60 ot be lis)5.0207 sted as	(3)(h) the
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on th (b) The 90th day after the record is filed.	e earl	lier of	•
Dated 10-5-2018			
Signature of a member or authorized representative of a member	में का <u>गिर्</u> ग - का क्राज	2015 0	٠,
Typed or printed name of signee	ix i	2018 OCT 15 i	
Page 3 of 3	# 55.AT	PH H: 39	£

Filing Fee: \$25.00