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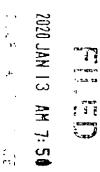
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LLC Articles of Amendment Filing

Florida Department of State Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

January 8, 2020

Please find enclosed duplicates of the Articles of Amendment for **East Coast ISP & ICT Solutions**, **LLC**, a domestic Limited Liability Company.

Please file the enclosed Articles of Amendment and return a file-stamped copy or Proof of Filing to the below address in the enclosed SASE.

Please note that the "Corps" found in the new company name does not stand for "Corporation", but stands for a body of people.

Payment for the required fees is enclosed (\$25.00 to the Department of State).

If you have any questions or concerns, please do not hesitate to contact us.

Thank you for your cooperation and assistance.

Sincerely,

The Client Services Team MyCompanyWorks, Inc. 187 E. Warm Springs Rd., Ste. B Las Vegas, NV 89119

Phone: 702-362-2677 Fax: 702-825-2581

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

East Coast ISP & ICT Solutions, LLC			
(Name of the Limited Liab (A Flor	oility Company as it now appears on our records.) ida Limited Liability Company)		
The Articles of Organization for this Limited Liability Florida document number <u>L19000277601</u>	Company were filed on 11/20/2019	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the li	mited liability company here:		
G.1 Corps, LLC			
The new name must be distinguishable and contain the words "I	imited Liability Company," the designation "LLC" or the ab	breviation "L.L.C."	
Enter new principal offices address, if applicable:			
(Principal office uddress MUST BE A STREET AD	DRESS)		
		20	
		2020 JAN	
Enter new mailing address, if applicable:		至] [2] 23 23 25 27 27 27 27 27 27 27 27 27 27 27 27 27
(Mailing address MAY BE A POST OFFICE BOX)		. + - - - -	1)
		N.	7 9
		-:	Rame
B. If amending the registered agent and/or re-		the name of the	new
registered agent and/or the new registered office a	ddress here:		
Name of New Registered Agent:			_
New Registered Office Address:			_
	Enter Florida 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 Member				
<u>Title</u>	<u>Name</u>	Address	Type of Action	
			Add	
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If amending any other inform	mation, enter change(s) here: (Attach additional sheets, if necessary.)
	
	
···	
Effective date, if other than is (If an effective date is listed, the date is Note: If the date inserted in this document's effective date on the	must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 is block does not meet the applicable statutory filing requirements, this date will not be listed as
he record specifies a delay The 90th day after the n	yed effective date, but not an effective time, at 12:01 a.m. on the earlier of record is filed.
Dated January 02	2020
	Rate
——————————————————————————————————————	Bignature of a member or authorized representative of a member
Ajmal Barakzai, Men	mher
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00