


EXHIBIT A

ARTICLES OF INCORPORATION
(Attached)

Form BCA-2.10 (Rev. Jan. 1999) Jesse White Secretary of State Department of Business Services Springfield, IL 62756 http://www.sos.state.il.us Payment must be made by certified check, cashier's check, Illinois attorney's check, Illinois C.P.A.'s check or money order, payable to "Secretary of State."	ARTICLES OF INCORPORATION This space for use by Secretary of State <div style="border: 1px solid black; padding: 5px; display: inline-block;"> Filed 1/16/2002 Jesse White Secretary of State </div> <div style="display: flex; justify-content: space-around; align-items: center;"> 62002301  </div> <div style="text-align: center; font-size: small;">CP0684676</div>	<div style="border: 1px solid black; padding: 5px; text-align: center; font-weight: bold;"> SUBMIT IN DUPLICATE! </div> This space for use by Secretary of State Date Filed 1/16/2002 Franchise Tax \$ 25.00 Filing Fee \$ 75.00 Approved BE \$100.00
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1. CORPORATE NAME: 1NETWORKS Group, Inc. [RE]

(The corporate name must contain the word "corporation", "company," "incorporated," "limited" or an abbreviation thereof.)

2. Initial Registered Agent: Laurence J. DeVries

First Name	Middle Initial	Last name
566 West Adams, Suite 600		
Number	Street	Suite #
Chicago	IL	Cook
City	County	Zip Code
		60661

3. Purpose or purposes for which the corporation is organized: 44
 (If not sufficient space to cover this point, add one or more sheets of this size.)
 To conduct any and all business for which corporations may be organized under the Illinois Business Corporation Act.

4. Paragraph 1: Authorized Shares, Issued Shares and Consideration Received:

Class	Par Value per Share	Number of Shares Authorized	Number of Shares Proposed to be Issued	Consideration to be Received Therefor
Common	\$ N/A	10,000	1000	\$100.00
TOTAL = \$100.00				

Paragraph 2: The preferences, qualifications, limitations, restrictions and special or relative rights in respect of the shares of each class are: N/A
 (If not sufficient space to cover this point, add one or more sheets of this size.)

(over)

5. **OPTIONAL:** (a) Number of directors constituting the initial board of directors of the corporation: _____
(b) Names and addresses of the persons who are to serve as directors until the first annual meeting of shareholders or until their successors are elected and qualify:

Name	Residential Address	City, State, ZIP

6. **OPTIONAL:** (a) It is estimated that the value of all property to be owned by the corporation for the following year wherever located will be: \$ _____
(b) It is estimated that the value of the property to be located within the State of Illinois during the following year will be: \$ _____
(c) It is estimated that the gross amount of business that will be transacted by the corporation during the following year will be: \$ _____
(d) It is estimated that the gross amount of business that will be transacted from places of business in the State of Illinois during the following year will be: \$ _____

7. **OPTIONAL: OTHER PROVISIONS**

Attach a separate sheet of this size for any other provision to be included in the Articles of Incorporation, e.g., authorizing preemptive rights, denying cumulative voting, regulating internal affairs, voting majority requirements, fixing a duration other than perpetual, etc.

8. **NAME(S) & ADDRESS(ES) OF INCORPORATOR(S)**

The undersigned incorporator(s) hereby declare(s), under penalties of perjury, that the statements made in the foregoing Articles of Incorporation are true.

Dated December 17, 2001
(Month & Day) Year

Signature and Name
1. <u>[Signature]</u> Signature <u>Laurence J DeVries</u> (Type or Print Name)
2. _____ Signature (Type or Print Name)
3. _____ Signature (Type or Print Name)

Address
1. <u>566 West Adams Street, Suite 600</u> Street <u>Chicago, Illinois 60661</u> City/Town State ZIP Code
2. _____ Street City/Town State ZIP Code
3. _____ Street City/Town State ZIP Code

(Signatures must be in **BLACK INK** on original document. Carbon copy, photocopy or rubber stamp signatures may only be used on conformed copies.)

NOTE: If a corporation acts as incorporator, the name of the corporation and the state of incorporation shall be shown and the execution shall be by its president or vice president and verified by him, and attested by its secretary or assistant secretary.

FEE SCHEDULE

- The initial franchise tax is assessed at the rate of 15/100 of 1 percent (\$1.50 per \$1,000) on the paid-in capital represented in this state, with a minimum of \$25.
 - The filing fee is \$75.
 - The minimum total due (franchise tax + filing fee) is \$100.
(Applies when the Consideration to be Received as set forth in Item 4 does not exceed \$16,667)
 - The Department of Business Services in Springfield will provide assistance in calculating the total fees if necessary.
- Illinois Secretary of State Springfield, IL 62756
Department of Business Services Telephone (217) 782-9522 or 782-9523

C-162.20

FORM BCA 5.10/5.20 (rev. Dec. 2003)

STATEMENT OF CHANGE OF
REGISTERED AGENT AND/OR
REGISTERED OFFICE
Business Corporation Act

Jesse White, Secretary of State
Department of Business Services
Springfield, IL 62756
217-782-3647
www.cyberdriveillinois.com

Remit payment in the form of a
check or money order payable
to Secretary of State.

FILED

FEB 26 2007

JESSE WHITE
SECRETARY OF STATE



CP0667654

PAID
FEB 27 2007

DEPARTMENT OF
BUSINESS SERVICES

File #

6200230-1

Filing Fee: \$25

Approved:

JH

Submit in duplicate Type or Print clearly in black ink Do not write above this line

1. Corporate Name: INETWORKS Group, Inc.

2. State or Country of Incorporation: Illinois

3. Name and Address of Registered Agent and Registered Office as they appear on the records of the Office of the Secretary of State (before change):

Registered Agent Laurence J. DeVries

First Name

Middle Name

Last Name

Registered Office 566 W. Adams, Suite 600

Number

Street

Suite No. (P.O. Box alone is unacceptable)

Chicago 60661 Cook

City

ZIP Code

County

4. Name and Address of Registered Agent and Registered Office shall be (after all changes herein reported):

Registered Agent Laurence J. DeVries

First Name

Middle Name

Last Name

Registered Office 900 W. Jackson, Suite #7E

Number

Street

Suite No. (P.O. Box alone is unacceptable)

Chicago

City

ZIP Code

County

60607

Cook

016

5. The address of the registered office and the address of the business office of the registered agent, as changed, will be identical.

6. The above change was authorized by: ("X" one box only)

- a. ☐ Resolution duly adopted by the board of directors. (Note 5)
b. ☒ Action of the registered agent. (Note 6)

SEE REVERSE FOR SIGNATURE(S).

7. If authorized by the board of directors, sign here. See Note 5 below.

The undersigned corporation has caused this statement to be signed by a duly authorized officer who affirms, under penalties of perjury, that the facts stated herein are true and correct.

Dated _____ , _____
Month & Day Year Exact Name of Corporation

Any Authorized Officer's Signature

Name and Title (type or print)

If change of registered office by registered agent, sign here. See Note 6 below.

The undersigned, under penalties of perjury, affirms that the facts stated herein are true and correct.

Dated February 8 , 2007
Month & Day Year

Signature of Registered Agent of Record
Laurence J. DeVries

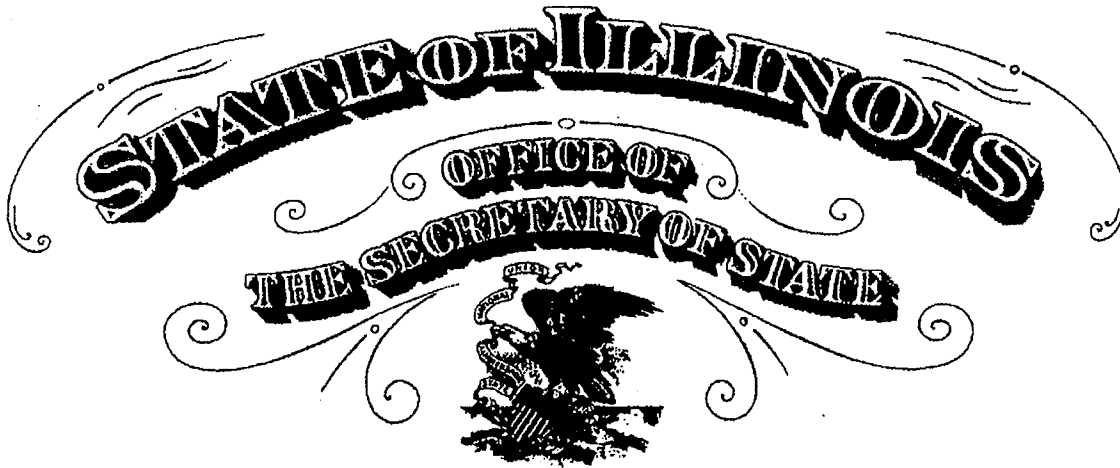
Name (type or print)
If Registered Agent is a corporation,
Name and Title of officer who is signing on its behalf.

NOTES

1. The registered office may, but need not be, the same as the principal office of the corporation. However, the registered office and the office address of the registered agent must be the same.
2. The registered office must include a street or road address (P.O. Box alone is unacceptable).
3. A corporation cannot act as its own registered agent.
4. If the registered office is changed from one county to another, the corporation must file with the Recorder of Deeds of the new county a certified copy of the Articles of Incorporation and a certified copy of the Statement of Change of Registered Office. Such certified copies may be obtained ONLY from the Secretary of State.
5. Any change of registered agent must be by resolution adopted by the board of directors. This statement must be signed by a duly authorized officer.
6. The registered agent may report a change of the registered office of the corporation for which he/she is a registered agent. When the agent reports such a change, this statement must be signed by the registered agent. If a corporation is acting as the registered agent, a duly authorized officer of such corporation must sign this statement.

File Number

6200-230-1



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that

THE FOREGOING AND HERETO ATTACHED IS A TRUE
AND CORRECT COPY, CONSISTING OF 04 PAGES, AS TAKEN FROM THE
ORIGINAL ON FILE IN THIS OFFICE FOR INETWORKS GROUP, INC. *****



*In Testimony Whereof, I hereto set
my hand and cause to be affixed the Great Seal of
the State of Illinois, this 19TH
day of SEPTEMBER A.D. 2008*

Jesse White

SECRETARY OF STATE