

L09000032599

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

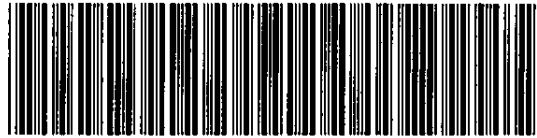
(Document Number)

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2009 DEC 14 PM 2:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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RETURNED CHECK

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Strategic Entertainment Network 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:

DAVID A LASALLA
Name of Person
Strategic Contracting Network
Firm/Company
835 EAST LAVAL BLVD #101
Address
ARLINGTON, TEXAS 76011
City/State and Zip Code
DAVIDANOREN-22 @ MSN.COM
E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

DAVID A LASALLA at (813) 407-2934
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- \$25.00 Filing Fee
- \$30.00 Filing Fee & Certificate of Status yes
- \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$60.00 Filing Fee, Certificate of Status & 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

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STRATEGIC ENTERTAINMENT NETWORK LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on April 3, 2009 and assigned
Florida document number LO9000032599

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

STRATEGIC CONTRACTING NETWORK LLC.

The new name must be distinguishable and end with the words "Limited Liability 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)

835 EAST LAMAR BLVD #101
Arlington, TX 76011

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

835 EAST LAMAR BLVD #101
Arlington, TX 76011

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address 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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	ROBERT BACON	P.O. Box 28775 Columbus, OHIO 43228	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
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			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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 TALLAHASSEE, FLORIDA
 2009 DEC 10 PM 2:43

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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary)*

Dated 12-10, 2009.
December 10

David Andrew LaSalla
Signature of a member or authorized representative of a member

DAVID ANDREW LASALLA
Typed or printed name of signee