

L060000040306

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

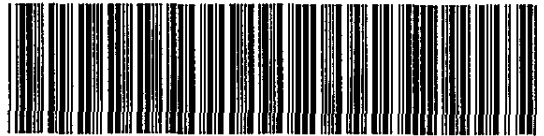
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
06 MAY -5 PM 2:42

J. BRYAN MAY 15 2006

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: 5 Star Bingo 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:

Star Spring Pickron

(Name of Person)

(Firm/Company)

PO BOX 57

(Address)

Blountstown FL 32424

(City/State and Zip Code)

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DIVISION OF CORPORATIONS  
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For further information concerning this matter, please call:

Star Spring Pickron

(Name of Person)

at ( 850 ) 899-7827

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☒ \$30.00 Filing Fee &  
Certificate of Status

☐ \$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**

5 Star Bingo LLC

(Present Name)  
(A Florida Limited Liability Company)

**FIRST:** The Articles of Organization were filed on 04-19-2006 and assigned document number L06000040306.

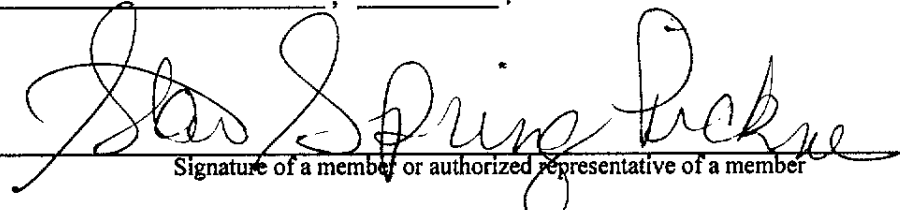
**SECOND:** This amendment is submitted to amend the following:

To change name. The name was gave incorrectly on the filing. The name should be changed to "5 Star Snacks LLC."

This is the Name that is on  
the fictitious Name Registration  
And also the name the EIN  
Number is in.

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DIVISION OF CORPORATIONS  
06 MAY -5 PM 2:42

Dated April 24th, 2006.

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

Star Spring Pickron

\_\_\_\_\_  
Typed or printed name of signee

**Filing Fee: \$25.00**