L06000114157

(Re	questor's Name)	
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(Cit	y/State/Zip/Phone	· #)
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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OCT - 9 2013

T. BROWN

COVER LETTER "

TO: Registration Section Division of Corporations	- ·	
us.		AND THE PROPERTY OF THE PROPER
SUBJECT: SPORTS & SCORES	PROPERTIES 1	LC.
Name of Limi	ted Liability Company	
The soules of Amister of American and I for the soules of	ta i e i en	
The enclosed Articles of Amendment and fee(s) are sub-	omitted for filing.	
Please return all correspondence concerning this matter	to the following:	
SIKIKUT	THIAL A	
	Name of Person	
SPORTS &	SCORES PROPERTO	ies, llc
2961 BER	NICE DRIVE Address	to a secondaria regionalista communicati
JACKSONVIL	LE, FL 32257 - City/State and Zip Code	5810
cellstars 192	41 & Yalroo . Com o be used for future annual report notificat	loll)
For further information concerning this matter, please c	all:	
SIK-KUTHIAL A Name of Person	at (<u>904) 444-98</u> Area Code & Daytime To	elephone 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 Ø Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Fallahassee, FL 32301

ARTICLES OF	AMENDMENT	•
T ARTICLES OF C O	O DRGANIZATION F	13 OCT - ED
Sports & Scores Proper (Name of the Limited Liability Compa (A Florida Limited)	Hes IIC ny as it not appears on on hability Company)	TALLAHASSEE, FLORIDA
The Articles of Organization for this Limited Liability Company	were filed on 1 Ze	2006 and assigned
Florida document number <u>L06000114157</u>	•	,
This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liab \[\lambda \lambda \] The new name must be distinguishable and end with the words "Lim"L.L.C."	ited Liability Company," th	
Enter new principal offices address, if applicable:	2961 Be	rnice Drive le, FL 32257-5810
(Principal office address MUST BE A STREET ADDRESS)	JUCKSENVI	<u>le, FL 32257-5810</u>
Enter new mailing address, if applicable:	NA	
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		cords, enter the name of the new
Name of New Registered Agent:	NA	
New Registered Office Address:		,
	Enter Flo	rida street address
	City	, Florida 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>	Address	Type of Action
MAM	SIK. KUTHIALA	2961 Bernice Brive	Add
		Jacksonville, FL 32257	Remove
MG.M_	SRINIVAS DASARI	1446 River May Street ST. Augustine, FL 32092	Add
<u>MGR</u> M	SUDHIR R. DASARI	409 TOCINA PL. ST. Augustine, FL 32092	Add
MGRM	Rajendra Amin	1200 Flonda Road CASTLE berry, FL 32707	Add
			Add Remove
	1		_ Add

•	1	
d	10/1/2013	
		Tentuals
		Signature of a member of authorized representative of a member 5, K, Kuthiala
		Typed or printed name of signee
	r	Page 3 of 3

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Filing Fee: \$25.00