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EXAMINER

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SECRETARY OF STATE

COVER LETTER

TO: · Registration S Division of Co	Section (prporations		
SUBJECT: V.I. Ver	ntures, LLC		
		nited Liability Company)	·
The enclosed Articles o	f Amendment and fee(s) are su	bmitted for filing.	
Please return all corresp	ondence concerning this matte	r to the following:	
	Donald G. Campbell		Market and
		(Name of Person)	
	POKER WHIZ WHE	EL, LLC	
		(Firm/Company)	
	10800 Brighton Bay	Blvd # 10102	
		(Address)	
	St Petersburg, FL 3	3716	
		(City/State and Zip Code)	*************************************
For further information	concerning this matter, please of	call:	
Donald G. Campb	ell VI	at (407_) 252-7148	
	of Person)	(Area Code & Daytime	Telephone Number)
Enclosed is a check for t	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

V.I. Ventures, LLC	<i></i>	
(Name of the Limited Liability) (A Florida	ity Company as it now appears on our record Limited Liability Company)	rus.
The Articles of Organization for this Limited Liability	Company were filed on 12/04/2006	and assigned
Florida document number <u>L06000115257</u>	······································	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the li	mited liability company here:	
POKER WHIZ WHEEL, L.L.C.		
The new name must be distinguishable and end with the w "L.L.C."	ords "Limited Liability Company," the design	nation "LLC" or the abbreviation
B. If amending the registered agent and/or registered agent and/or the new registered office ad Name of New Registered Agent:		enter the name of the new
New Registered Office Address:		
	(Enter Florida street address)	
	, Florida	
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Register	red Agent:	
I hereby accept the appointment as registered agen the provisions of all statutes relative to the proper a accept the obligations of my position as registered a being filed to merely reflect a change in the register company has been notified in writing of this change	and complete performance of my duties, agent as provided for in Chapter 608, F red office address, I hereby confirm that	and I am familiar with and S. Or, if this document is
	(If Changing Registered Agent, Signature of	New Registered Agent)

Page 1 of 2

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

Title	<u>Name</u>	Address	Type of Action
MGRM	Michelle Marie Dean	10800 Brighton Bay Blvd NE # 10102 St. Petersburg, FL 33716	Add Remove
MGRM_	Steven Charles Boetto	700 Cranes Landing Cove Longwood, FL 32750	Add Remove
•			AddRemove
			Add Remove
· · · · · · · · · · · · · · · · · · ·	·		AddRemove
			Add Remove
D. If amen	ding any other information, enter chang	ge(s) here: (Attach additional sheets, if neces	sary.)
<u> </u>			
— —— Dated Janu	uary 1 / 2,2408		
<u> </u>		for authorized representative of a member	2008
•	Donald G. Campbell VI	or additional representative of a member	>> = TI
	Typed	or printed name of signee	
		Page 2 of 2	SEE 2
	F	iling Fee: \$25.00	