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N. Outlown JAN 25 2008

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Tickets Pros 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:
Fred Zaytoun (Name of Person)
Tickets Pos LLC
4903 Davden Avenue
Orland FU 32812 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (401) 182-3023 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount: \$\sum{25.00 Filing Fee} \text{ \$\sum{30.00 Filing Fee & Certificate of Status} } \text{ \$\sum{255.00 Filing Fee & Certified Copy (additional copy is enclosed)} } \text{ \$\sum{60.00 Filing Fee, Certified Copy (additional copy is enclosed)} } \text{ \$\sum{60.00 Filing Fee, Certified Copy (additional copy is enclosed)} } \text{ \$\sum{60.00 Filing Fee, Certified Copy (additional copy is enclosed)} } \text{ \$\sum{60.00 Filing Fee, Certified Copy (additional copy is enclosed)} } \text{ \$\sum{60.00 Filing Fee, Certified Copy (additional copy is enclosed)} } \text{ \$\sum{60.00 Filing Fee, Certified Copy (additional copy is enclosed)} } \text{ \$\sum{60.00 Filing Fee, Certified Copy (additional copy is enclosed)} } \text{ \$\sum{60.00 Filing Fee, Certified Copy (additional copy is enclosed)} } \text{ \$\sum{60.00 Filing Fee, Certified Copy (additional copy is enclosed)} } \text{ \$\sum{60.00 Filing Fee, Certified Copy (additional copy is enclosed)} } \text{ \$\sum{60.00 Filing Fee, Certified Copy (additional copy is enclosed)} } \text{ \$\sum{60.00 Filing Fee, Certified Copy (additional copy is enclosed)} } \text{ \$\sum{60.00 Filing Fee, Certified Copy (additional copy is enclosed)} } \text{ \$\sum{60.00 Filing Fee, Certified Copy (additional copy is enclosed)} } \text{ \$\sum{60.00 Filing Fee, Certified Copy (additional copy is enclosed)} } \text{ \$\sum{60.00 Filing Fee, Certified Copy (additional copy is enclosed)} } \text{ \$\sum{60.00 Filing Fee, Certified Copy (additional copy is enclosed)} } \text{ \$\sum{60.00 Filing Fee, Certified Copy (additional copy is enclosed)} } \text{ \$\sum{60.00 Filing Fee, Certified Copy (additional copy is enclosed)} } \text{ \$\sum{60.00 Filing Fee, Certified Copy (additional copy is enclosed)} } \text{ \$\sum{60.00 Filing Fee, Certified Copy (additional copy is enclosed)} } \text{ \$\sum{60.00 Filing Fee, Certified Copy (additional copy is enclosed)} } \text{ \$\sum{60.00 Filing Fee, Certified Copy (additional copy is enclosed)} } \$\sum{60.00 F

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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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

Tick	ets pros, LLC	
(Name of the Limited 1	Liability Company as it now appears or Florida Limited Liability Company)	our records.)
The Articles of Organization for this Limited Lia	ibility Company were filed on	14/0 and assigned
Florida document number <u>L07000585</u>	551	SECR SECR
This amendment is submitted to amend the following	wing:	N24 AMI
A. If amending name, enter the new name of Ti CLC+ Pros	the limited liability company here:	1:36
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Company,"	the designation "LLC" or the abbreviation
B. If amending the registered agent and/or registered agent and/or the new registered off		records, enter the name of the new
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:

	<u>Name</u>	Address	Type of Actio
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amen	ding any other information, enter	change(s) here: (Attach additional sheet.	s, if necessary.)
			OB JAN 24 AM 11: SECRETARY OF 3
			FLORIDA
	4	member or authorized representative of a men Whovh Typed or printed name of signee	

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Filing Fee: \$25.00