L07000071506

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(Ad	ldress)			
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C. LEWIS FEB 6 2009 **EXAMINER**

COVER LETTER .

*Division of Corp	orations		
SUBJECT: Tampa E	Bay Interactive LLC	;	
	(Name of Lim	ited Liability Company)	
The enclosed Articles of A	mendment and fee(s) are sub	omitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
	William McKee		
		(Name of Person)	
	Tampa Bay Interactive L		
		(Firm/Company)	
	9846 W Park Village Dr		
		(Address)	
	Tampa, FL 33626		
		(City/State and Zip Code)	
For further information co	ncerning this matter, please c	alle	
i or institute information co.	ncerning this matter, please c	an.	
William McKee	at (813) 205-7294		
(Name of	Person)	(Area Code & Daytime To	elephone Number)
	6.11		
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:

TO:

Registration Section

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

FILED 2009 FEB - 5 PM 1: 47

SECRETARY OF STATE PARTE PLORIDA

eGuides LLC

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

The Articles of Organization for this Limited Liability Florida document number L07000071506 This amendment is submitted to amend the following		were filed on $07/1$	0/2007 and assigned
	_ ·		
This amendment is submitted to amend the following			
	; :		
A. If amending name, enter the new name of the	<u>limited liab</u>	ility company here	3
Tampa Bay Interactive LLC			
The new name must be distinguishable and end with the "L.L.C."	words "Limi	ited Liability Compar	ry," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		9846 W Park Village Dr	
(Principal office address MUST BE A STREET ADDRESS)		Tampa, FL 3362	6
Enter new mailing address, if applicable: (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 here			6
registered agent and/of the new registered office a	iddi ess iiei	<u>.</u> .	
Name of New Registered Agent: Wi	William McKee		
New Registered Office Address: 98			
	(Enter Florida street address)		
T <u>a</u>	mpa		, Florida <u>33626</u>
		(City)	(Zip Code)

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 = Manage MGRM = Mana			
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
			Add Remove
		·	Add Remove
			Add Remove
D. If amending	any other information, enter change(s) here: (Attach additional sheets, if necessary.)	_
			2009 FEB
Dated February 2		V 00 -111	SSEE PH
	Signature of a member of	authorized representative of a member	
	William H. McKee, III	printed name of signee	10

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Filing Fee: \$25.00