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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

C. LEWIS

MAR 2 2010

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: SHOOT & SCORE PRODUCTION S 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:				
K ANDREW RITTER				
K. Ander Ritter Name of Person				
SHOOT , SCORE / TIAS MCGEE PROLUTIONS				
Firm/Company				
8720 COBBLESTONE DRIVE				
Address				
TAMPA, FLORINA 33615 City/State and Zip Code				
City/State and Zip Code				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
K. ANDREW RITTER at (813) 888-6761				
K. ANDREW KITTER at (813) 888 - 6761 Name of Person Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount:				
\$25.00 Filing Fee \$\sim \text{S30.00 Filing Fee & Certificate of Status}\$ Certificate of Status \$\sim \text{Certified Copy (additional copy is enclosed)}\$ Certified Copy (additional copy is enclosed) 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

FILED

2010 MAR - J. PM 3: 1.0

_	^	EVIVIANT OF THE
SHOOT SCORE	PRODUCTIONS	LLC SECRETARY OF STATE hour records ALLAHASSEE. FLORID
(Name of the Limited Liability Co (A Florida Lim	mpany as it now appears of ited Liability Company)	h our records!ALLAHASSEE.FLURID.
The Articles of Organization for this Limited Liability Com	pany were filed on Jou	4 19, 288 7 and assigned
Florida document number L \$ 7\$\$ \$ \$ 7	4682	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
TIPS MCCEE PRODUCT. The new name must be distinguishable and end with the words "L.L.C."	Limited Liability Company,	"the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		BRLESTOR DENE
(Principal office address MUST BE A STREET ADDRES.	S) Tampa, F	EL 33615
Enter new mailing address, if applicable:	-	
(Mailing address MAY BE A POST OFFICE BOX)	<u></u> .	· · · · · · · · · · · · · · · · · · ·
		•
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		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:

MGR = Manager

<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
<u></u> -			Add Remove
·······			Add Remove
<u></u>			Add Remove
			Add Remove
·			Add Remove
). If amend	ling any other information, enter chang	ge(s) here: (Attach additional sheets, if necesso	ary.)
			
Dated Few	3 24, 20		2010 F
	Signature of a member K. ANDREW RIT	r or authorized representative of a member	AHASSI
	Typed	Or printed name of signee Page 2 of 2	PH 3: 16 PEE, FLORIDA

Filing Fee: \$25.00