L07000/03282

(Requestor's Name)				
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(City/State/Zip/Phone #)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
. (Document Number)				
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A. LUNT				
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SECRETARY OF STATE

COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT:	Tebow Cof	Fee LLC ted Liability Company)	····
The enclosed Articles of	Amendment and fee(s) are sub-	nitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Frank	(Name of Person)	· · · · · · · · · · · · · · · · · · ·
Vor further information o	204 Cea Oldsma	(Firm/Company) Ar Key Ct, (Address) (FL 346>) (City/State and Zip Code)	TILED 1008 JUN -5 A II: 29 SECRETARY OF STATE SECRETARY OF STATE ALLAH ASSEE, FLORIDA
	•	at (<u>8/3)</u> <u>924-3</u> (Area Code & Daytime T	HBO elephone Number)
Enclosed is a check for the	ne 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 Tailahassee, 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

Devin Enter	tainment, LLC		
(<u>Name of the Limited Liability</u> (A Florida I	Company as it now appears on ou Limited Liability Company)	r records.)	
The Articles of Organization for this Limited Liability Control of		1/2007 and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limit	ited liability company here:		
Telaw Coffee.	LLC		
The new name must be distinguishable and end with the wor	rds "Limited Liability Company," the	designation "LLC" or the abbreviation	
"L.L.C."		•	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDR	RESS)	SEC Man	
		Am S	
		-5 AR SSI	
Enter new mailing address, if applicable:		m _o m	
(Mailing address MAY BE A POST OFFICE BOX)		FES = O	
· · · · · · · · · · · · · · · · · · ·		ATE ORIG	
	,	>	
B. If amending the registered agent and/or regist	tered office address on our rec	ords, enter the name of the new	
registered agent and/or the new registered office add	ress here:		
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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM =	MGRM = Managing Member						
<u>Title</u>	<u>Name</u>	Address	Type of Action				
			Add				
<u>+</u>			Add Remove				
			AddRemove				
			Add				
			Remove				
			Add Remove				
D. If amen — —	Sell coffee	ge(s) here: (Attach additional sheets, if necession of the control	15 T				
-			11 29 TATE				
Dated	6/3 . 20	08					
	Signature of a member	r or authorized representative of a member					
	Fran	or printed name of signee					

Page 2 of 2

Filing Fee: \$25.00