08000013923

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

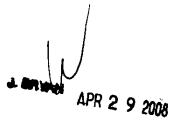
Office Use Only



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08 MAY -6 PH 4: 09



J. BRYAN

MAY - 7 2008

EXAMINER

COVER LETTER

TO: Registration Se		
SUBJECT:	Sports face L.L.C. (Name of Limited Liability Company)	
School .	(Name of Limited Liability Company)	
The enclosed Articles of	Amendment and fee(s) are submitted for filing.	
Please return all correspo	ondence concerning this matter to the following:	
	ScoTT Siegel (Dame of Person)	
	Scott Siegel (Dame of Person) FAN Stamp LLC. (Firm/Company)	
	P. J. Box 3140/1429 Holfs GRove Cin (Address) Winter Pari St 32789 (City/State and Zip Code)	98 91/10 18
	(City/State and Zip Code)	SECREI
For further information c	oncerning this matter, please call:	FILED ARY O
Scot	at (407) 234,5513 (Area Code & Davigne Telephone Number)	PH 4: 09
(Name o	of Person) (Area Code & Daytime Telephone Number)	SHOIL STEEL
Enclosed is a check for the	ne following amount:	
\$25.00 Filing Fee	(additional copy is enclosed) Certified C	of Status &

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



FLORIDA DEPARTMENT OF STATE **Division of Corporations**

April 29, 2008

SCOTT SIEGEL FAN STAMP, L.L.C. P.O. BOX 3140. WINTER PARK, FL 32789

SUBJECT: SPORTS FACE L.L.C. Ref. Number: L08000013923

We have received your document for SPORTS FACE L.L.C. and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We didn't receive the 2nd page of application

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan Regulatory Specialist II

Letter Number: 408A00026309

MR. Breyon - Plus find enclosed 2nd page. Sinarly,

ARTICLES OF AMENDMENT

	TO	<u>e Zu</u>
ARTIC	CLES OF ORGANIZATION	ON SG
	OF	T OFF
. Spats	face, L.L.C.	6 P
(Name of the Limited I (A F	Jability Company as it now appears Florida Limited Liability Company)	on our records.) F. A.P. O./6/08 and assigned
The Articles of Organization for this Limited Lial Florida document number	bility Company were filed on	2/6/08 and assigned
Tionda document namoci		
This amendment is submitted to amend the follow	wing:	
A. If amending name, enter the new name of t		
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Compan	y," the designation "LLC" or the abbreviation
B. If amending the registered agent and/or registered agent and/or the new registered offi		ir records, enter the name of the new
Name of New Registered Agent:	ScoTT Sieg	geL
New Registered Office Address:	P.0. βωχ 3	ICL 140 / 1429 HoHS GROVE CIR. er Florida street address)
	Winter PARK	er Florida street address), Florida(Zip Code)
	(City)	(Esp Couc)

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 MGRM = Managing Member <u>Title</u> <u>Name</u> <u>Address</u> Type of Action Add Remove ☐ Add Remove Add Remove Add Remove \Box Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 08 MAY -6 PH 4: 09 2008 Dated Signature a member or authorized representative of a member Siegul

Page 2 of 2

Typed or printed name of signee

Filing Fee: \$25.00