

**LD80000069127**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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JUL 19 2013

**L. SELLERS**

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**FILED**  
13 JUL 17 PM 4:56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: TICKETGENIE.COM"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:

**PATRICK POULIN JR**

Name of Person

**TICKETGENIE.COM"LLC"**

Firm/Company

**37 N ORANGE AVE SUITE 500**

Address

**ORLANDO, FLORIDA 32801**

City/State and Zip Code

**PATRICK@TICKETGENIE.COM**

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**PATRICK POULIN JR**

Name of Person

**at (407) 7091494**

Area Code & Daytime Telephone Number

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:**

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

## TICKETGENIE.COM"LLC"

Page 1 of 3

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>	<u>Type of Action</u>
MGRM	PATRICK POULIN JR	37 NORTH ORANGE AVE	<input checked="" type="checkbox"/> Add
		SUITE 500	<input type="checkbox"/> Remove
		ORLANDO, FLORIDA 32801	
MGRM	ADAM JANOWICZ	37 N ORANGE AVE	<input type="checkbox"/> Add
		SUITE 500	<input checked="" type="checkbox"/> Remove
		ORLANDO, FLORIDA 32801	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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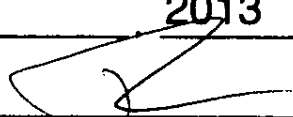
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Dated July 15 2013

  
Signature of a member or authorized representative of a member

PATRICK POULIN JR

Typed or printed name of signee

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Filing Fee: \$25.00