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(Requestor's Name)	
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PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	• •
	,
Certified Copies Certificates of St	ratus :
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Special Instructions to Filing Officer:	
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Marker Mr. ,	
	





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2009 SEP 23 AM 10: 58 SECRETARY OF STATE

FILED

COVER LETTER

10:	Division of Corpo			•	•	
SUBJE	CT:	Spin-Win I	Management, LLC			
50202	o		ited Liability Company			
The enc	closed Articles of Ar	nendment and fee(s) are su	bmitted for filing.			
Please r	eturn all correspond	lence concerning this matte	r to the following:			
		Jo	ohn C. Collins, Esquire	1	_	
			Name of Feison		± 2	
		Jo	ohn C. Collins Co LPA Firm/Company		NECH SECH	- Control
			Firm/Company		2009 SEP 23 SECRE TARY TALLAHASSI	
		333	S. Main Street, Suite 3	04	(M) 	T (T
			Address		AM 10: 5	
			Akron, Ohio 44308		AH IO: 58 OF STATE SE. FLORIDA	
			City/State and Zip Code		5 · · · · · ·	
		E-mail address: (jcatty2@aol.com (to be used for future annual repo	rt notification)	_	
For furt	her information con	cerning this matter, please of	call:			
		l Hagenbush	at (330)	535-7987		
	Name of P	erson	Area Code & 1	Daytime Telephone Num	iber	
		§				
	d is a check for the					
√ \$25.	00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is en	Certificolosed) Certif	Filing Fee, ficate of Status & fied Copy is enc	
		G ADDRESS: ion Section	STREET/C Registration	OURIER ADDRESS	iz	
		of Corporations		Corporations		

Tallahassee, FL 32314

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LC			
ears on our records.) y)			
July 14, 2008 and assigned			
here:			
npany," the designation "LLC" or the abbreviatio			
); (009)			
HALL EP			
SSE 23			
58 10 _A			
our records, <u>enter the name of the ne</u> y			
Enter Florida street address			
, Florida			
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 MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRN	M Eric Miller	2644 SW Rivershore Drive Port St. Lucie, FL 34984	Add ☐ Remove
ATTY	John C. Collins	333 S. Main Street, Suite 304 Akron, Ohio 44308	Add ✓ Remove
		TACE AND SECOND AND ADDRESS OF THE CONTRACT AND ADDRESS OF	Remove—
D. If ar	nending any other information, enter	change(s) here: (Attach additional sheets, if necessary.)	1
	John C. Collins is not and never	er was a member and/or managing member	
	of Spin-Win Management, LLC	. John C. Collins is only the	
	Registered Agent for the Limite	ed Liability Company, and does not now nor	
	has he ever had an ownership	interest in Spin-Win Management, LLC.	_
Dated _	September 22	2009	<u> </u>
	Signature of a	member or authorized representative of a member	<u></u> _
	org iatule of a	John C. Collins, Esquire	
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00