

L09000009804

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

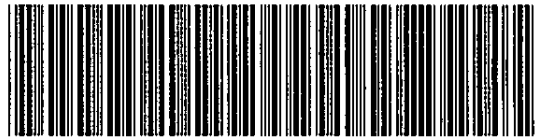
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

S. HAWKES

SEP 28 2009

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Texas Hold'em Poker Tours, 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:

Carol Ann Johnson

Name of Person

Texas Hold'em Poker Tours, LLC

Firm/Company

P. O. Box 100964

Address

Palm Bay, FL 32910-0964

City/State and Zip Code

carolann@texasholdempokertours.com

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

For further information concerning this matter, please call:

Carol Ann Johnson

Name of Person

at (321)

258-5060

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

Texas Hold'em Poker Tours, LLC

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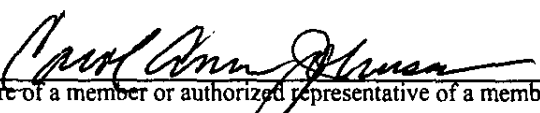
If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Timothy Lee Shaffer	P. O. Box 236902 Cocoa, FL 32923	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated September 22, 2009



 Signature of a member or authorized representative of a member
 Carol Ann Johnson

 Typed or printed name of signer

FILED
SEP 25 2009
13 11:31
CLERK OF DISTRICT COURT
FLORIDA
JANUARY 2010