## L09000109346

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

## **COVER LETTER**

**Division of Corporations** Skateboarding Entertainment LLC SUBJECT: 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: Phylisa Dever Name of Person Skateboard Entertainment LLC Firm/Company 301 E. Pine Street Suite 150 Address Orlando, Florida 32801 City/State and Zip Code deverlisa@cfl.rr.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Phylisa Dever Name of Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount: \$55.00 Filing Fee & \$25.00 Filing Fee \$30.00 Filing Fee & \$60.00 Filing Fee, Certificate of Status & Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy

**MAILING ADDRESS:** 

TO:

**Registration Section** 

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

(additional copy is enclosed)

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Skate Boardin	g Entertainme	nt LLC	
(Name of the Limited Liability C (A Florida Lin	ompany as it now ap nited Liability Compar	pears on our records.) ny)	
The Articles of Organization for this Limited Liability Con Florida document number L09000109346	npany were filed on .	November 13, 2009	_ and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	d liability company	here:	
Skateboarding	g Entertainment L	LC	
The new name must be distinguishable and end with the words "L.L.C."	"Limited Liability Co	mpany," the designation "LL	C" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRES	<u> </u>		
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered agent and/or the new registered office address		on our records, <u>enter the</u>	name of the new
Name of New Registered Agent:			
New Registered Office Address:			
		Enter Florida street addres	55
	<u> </u>	, Florida	
New Registered Agent's Signature, if changing Registered A	City	TALLAH	ZIP Code SECRE
I hereby accept the appointment as registered agent and the provisions of all statutes relative to the proper and a accept the obligations of my position as registered agen being filed to merely reflect a change in the registered of company has been notified in writing of this change.	complete performa nt as provided for in	nce of my duties, and I ám n Chapter 608, F.S. Or, £	familiar with and Mis decument s

MGR = Manager

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>:

MGRM =	= Managing Member					
<u>Title</u>	Name Positive News &	Address 301 E. Pine Street ,Suite 150 Orlando, Florida 32801	Type of Action			
MGR	Information Network LLC	301 E. Pine Street ,Suite 150 Orlando, Florida 32801	Add Remove			
<del></del>			Add Remove			
			Add Remove			
	<del></del> ,		Add Remove			
			□Add □Remove			
******			Add Remove			
D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)  Managing Member Joseph Dever 50% ownership						
_	Managing Member Phylisa Dever 50 %		-			
-			. 10			
Dated	February 15 , 2010	authorized representative of a member				
	Pt Typed or	nylisa Dever Sprinted name of signee	. ე. — გვ			

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Filing Fee: \$25.00