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SECRETARY OF STATE DIVISION OF CORPORATIONS

T. HAMPTON

APR - 1 2010

EXAMINER

COVER LETTER

TO:

Registration Section

Division of Corporations						
SUBJECT:	JHG ENTERTAIN	IMENT OF TAMPA, LLC	,			
SUBJECT:	Name of Limited Liability Company					
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing				
		_				
Please return all correspon	ndence concerning this matter	to the following:				
		Thomas C. Little				
	Name of Person					
	Thomas C. Little, P.A.					
	Firm/Company					
	2123 N.E. Coachman Road, Suite A					
		Address	HALE			
	,	Cloopyotor El 22765				
		Clearwater, FL 33765 City/State and Zip Code				
	jar	net@thomasclittle.com				
	E-mail address: (to be used for future annual report notific	ation)			
For further information co	oncerning this matter, please c	call:				
Tho	mas C. Little	707 /	43-5773			
Name of		at (727) 4 Area Code & Daytime				
Enclosed is a check for th	e 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)			
Registr Divisio P.O. Bo	ING ADDRESS: ation Section n of Corporations ox 6327 ssee, FL 32314	STREET/COURIE Registration Section Division of Corpora Clifton Building 2661 Executive Cen	tions			

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JHG ENTE	RTAINME	NT OF TAME	PA, LLC			
(Name of the Limited I	<u>Liability Compar</u> Florida Limited L	ny as it now appear iability Company)	rs on our records.)			
The Articles of Organization for this Limited Lia	were filed on	12/21/2009	and assig	gned		
Florida document number L09000120	858					
This amendment is submitted to amend the follow	wing:					
A. If amending name, enter the new name of	the limited liab	ility company her	<u>e</u> :			
The new name must be distinguishable and and with	4b	And I inhility Comme	" 4b - d-si	[C" the -h	hun dation	
The new name must be distinguishable and end with "L.L.C."	i the words "Limi	ted Liability Compa	any," the designation "Li	C" or the ab	breviation	
Enter new principal offices address, if applicable:		2123 N.E. Coachman Road				
(Principal office address MUST BE A STREET	(ADDRESS)	Suite A			2	
		Clearwater, F	FL 33765	10	38. 38. 38.	
					웃	
Enter new mailing address, if applicable:				<u> </u>	PA 7	
(Mailing address MAY BE A POST OFFICE B			70	800		
				-365	ည္တိုင္သ	
			•		<u> </u>	
B. If amending the registered agent and/or registered agent and/or the new registered off			our records, <u>enter th</u>	ie name of	the nev	
registered agent unity of the new registered on	ice address her	<u>c</u> .				
Name of New Registered Agent:	Thomas C. Little					
New Registered Office Address:	2123 N.E. Coachman Road, Suite A					
	Enter Florida street address					
		Clearwater	, Florida	33765		
		City		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 Type of Action **Title** <u>Name</u> **Address** MGRM John H. Gingola 5680 86th Ave North ☐ Add Remove Pinellas Park, FL 33782 Harold R. E. Johnson, Trustee MGRM 2123 N.E. Coachman Road ✓ Add Remove Suite A of KREJ Irrevocable Trust Clearwater, FL 33765 No. 26 u/t/d 3-24-2010☐ Add Remove ☐ Add Remove ∏Add ☐ Remove \square Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated ____ March 24 2010 Signature of a member or authorized representative of a member John H. Gingola Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00