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MAY 24 2010

EXAMINER



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05/21/10--01027--008 **30.00

10 MAY 21 PM 12: 47

DIVISION OF COMPONIATE

COVER LETTER

TO:	Registration Section Division of Corporations
SUBJ	Name of Limited Liability Company
The er	nclosed Articles of Amendment and fee(s) are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	Troy Told
	Name of Person
	Street Side Promotions LLC
	Firm/Company
	2183 Fresco Dr
	Hiddleburg FL 32068 City/State and Zip Code +stodde nail. Clay. K12. H. 45 E-mail address: (to be used for future annual report notification)
	City/State and Zip Code
	E-mail address: (to be used for future annual report notification)
For fu	rther information concerning this matter, please call:
	Troy Todd at (904) 993 - 6993 Name of Person Area Code & Daytime Telephone Number
Enclos	sed is a check for the following amount:
□ \$2	5.00 Filing Fee \$\ \text{Certificate of Status} \text{S55.00 Filing Fee & Certified Copy (additional copy is enclosed)} \text{\$\frac{1}{2}\$} \frac{1}{2}\$\$\$ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)} \text{\$\frac{1}{2}\$}\$\$\$\$\$ \$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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

Street Side	Promotions LLC	
(Name of the Limited Lia (A Flo	bility Company as it now appears on our recorda Limited Liability Company)	ords.)
The Articles of Organization for this Limited Liabi Florida document number _L\00\0000316	lity Company were filed on	and assigned
This amendment is submitted to amend the following	ng:	
A. If amending name, enter the new name of the List - Ready Proper The new name must be distinguishable and end with the "L.L.C."		gnation "LLC" or the abbreviation
Enter new principal offices address, if applicable	e:	<u> </u>
(Principal office address MUST BE A STREET A	(DDRESS)	x 50
		7 21 PI
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u> </u>	73.
Manning warress MAT BE A TOST OF TICE BO.	<u> </u>	5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
B. If amending the registered agent and/or registered agent and/or the new registered office		
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida s	treet address
	El	orida
-	City	Zip Code
New Registered Agent's Signature, if changing Regi	stered 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

<u>tle</u>	<u>Name</u>	Address	Type of Action
, <u>, , , , , , , , , , , , , , , , , , </u>	·		Add Remove
			Add Remove
 .			Add Remove
			Add Remove
			Add Remove
	·		Add Remove
If amend	ling any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary.)	
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ted <u>5</u>	18/2010 , 201	0	
	Signature of a member	r or authorized representative of a member	

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Filing Fee: \$25.00