LIDOODODODAG

(Requestor's Name)		
(Address)		
· · · · · ·		
(0.11,)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Duginaga Entity Nama)		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer.		

Office Use Only



500167294495

02/12/10--01012--019 **30.00

FILED

10 FEB 12 AM II: 40
SECRETARY OF STATE
FALLAHASSEF, FIGURE

D. BRUCE

FEB 15 2010

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Games Can Be Act, 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:	
Treuor Duyn Name of Person	
Firm/Company	
11475 Swift Water Circle	
Orlando, FL 32817 City/State and Zip Code	10 FE
E-mail address: (to be used for future annual report notification)	FEB 12 AHASSE
For further information concerning this matter, please call:	
Trevor Duwyn at (407) 341 - 0514 Name of Person Area Code & Daytime Telephone Number	AR II: 40 OF STATE
Enclosed is a check for the following amount:	
(additional copy is enclosed) Certified	ate of Status &

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

and the property of the contract of

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	
The Articles of Organization for this Limited Liability Company we Florida document number 4100006026 .	vere filed on $01/19/2010$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, <u>enter the new name of the limited liabil</u> i	ity company here:
The new name must be distinguishable and end with the words "Limite "L.L.C."	d Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable: (<u>Mailing address MAY BE A POST OFFICE BOX)</u>	TO FEB 12 MIII:
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:	ce address on our records, enter the fixing of the new
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address

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.

City

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** Hancock, Joseph Jackson, Daniel MKRM ☐ Add Remove MGRM ☐ Add ☐ Remove Add Remove □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00