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SCURICIARY OF STATE

TALLAIMSSEE, FLORIDA

K. SALY EXAMINER DEC 2 1 2010

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: BALLY HOO Group, 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:			
Robert Mueller Name of Person Ballyhoo Group, 2LC Firm/Company 936 Pivellas Bayway THL			
City/State and Zip Code Bob Mueller @ Tumpabay, rr. Lom E-mail address: (to be used for future annual report notification))			
For further information concerning this matter, please call:			
Rosent Mueller at 727 420-9296 Name of Person Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount:			
\$25.00 Filing Fee Certificate of Status Certificate of Status 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			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

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	Or	14 050 50 111 1-35	
BALLY 100 (Name of the Limited L	iability Company as it now appears of lorida Limited Liability Company)	SEUNETARY OF STATE	
The Articles of Organization for this Limited Liab		01/2010 and assigned	
Florida document number L \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	<u>35</u> 36		
This amendment is submitted to amend the follow	ring:		
A. If amending name, enter the new name of the	he limited liability company here:		
The new name must be distinguishable and end with t "L.L.C."	the words "Limited Liability Company	"," the designation "LLC" or the abbreviation	
Enter new principal offices address, if applicab	le:		
(Principal office address MUST BE A STREET.	ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u> </u>		
B. If amending the registered agent and/or registered agent and/or the new registered office		records, enter the name of the new	
Name of New Registered Agent:			
New Registered Office Address:	Enter	Florida street address	
·	, Florida		
	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

Title Address **Type of Action** Name ROBERT J. Mueller 936 Pinelias Bayway THG Add
Tierra works 71 Remo
33715

RANDAL E. GASSMAN 4213 Deepwater LN MAdd
TAMPA, 71. Remo ☐ 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 Signature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00