

#L10000125248

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALLY
EXAMINER

DEC 28 2010

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Game Doctor, 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:

Michael G Hernandez

Name of Person

Game Doctor, LLC

Firm/Company

1408 Alhambra Drive

Address

Apollo Beach, FL 33572

City/State and Zip Code

mikehansen18@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mike Hernandez

Name of Person

at (720)

231-1845

Area Code & Daytime Telephone Number

Enclosed is a check for the 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)

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**

Game Doctor, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
10 DEC 23 AM 10:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 12/07/2010 and assigned
Florida document number L10000125248.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable: _____

(Principal office address MUST BE A STREET ADDRESS) _____

Enter new mailing address, if applicable: _____

(Mailing address MAY BE A POST OFFICE BOX) _____

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: Michael Hernandez

New Registered Office Address: 1408 Alhambra Drive

Enter Florida street address

Apollo Beach

Florida

33572

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Lisa F Hansen	1408 Alhambra Drive Apollo Beach, FL 33572	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Mike Hansen	1408 Alhambra Drive Apollo Beach, FL 33572	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Michael Hernandez	1408 Alhambra Drive Apollo Beach, FL 33572	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated DEC 21, 2010.

Mike Hansen
Signature of a member or authorized representative of a member

Mike Hansen
Typed or printed name of signee

State of Florida

Department of State

I certify from the records of this office that GAME DOCTOR, LLC is a limited liability company organized under the laws of the State of Florida, filed on December 7, 2010, effective December 5, 2010.

The document number of this limited liability company is L10000125248.

I further certify that said limited liability company has paid all fees due this office through December 31, 2010, and its status is active.

I further certify that said limited liability company has not filed Articles of Dissolution.

*Given under my hand and the Great Seal of
Florida, at Tallahassee, the Capital, this the
Seventeenth day of December, 2010*



Laurel K. Roberts
Secretary of State

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