

# L10000126421

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(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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HARRINGTON,  
HOPPE &  
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Legal Solutions for Business and Life

November 29, 2011

Florida Department of State  
Division of Corporations  
Registration Section  
P.O. Box 6327  
Tallahassee, FL 32314

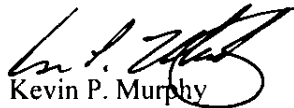
RE: Cheap Tobacco IV, LLC

Gentlemen:

Enclosed please find an original and one copy of a cover letter and Articles of Amendment to the Articles of Organization of Cheap Tobacco IV, LLC. Also enclosed is our firm's check for the filing fee in the amount of \$25. Please process the enclosed Articles of Amendment and return a time-stamped copy to me in the envelope provided.

Thank you for your assistance.

Sincerely,



Kevin P. Murphy

KPM:kl  
Enclosures

John L. Pogue  
Paul M. Dutton  
Michael G. Marando  
James L. Blomstrom  
Frederick S. Coombs, III  
Ralph A. Beard  
Alan D. Wenger  
William L. Hawley  
Thomas G. Carey, Jr.  
John T. Dellick  
Kevin P. Murphy  
Shirley J. Christian  
Neil H. Maxwell  
Martin J. Boetcher  
Patrick K. Wilson  
Neil D. Schor  
Shawna L. L'Italien  
Michael J. McGee  
Deborah A. Kaufmann  
George P. Millich, Jr.  
Christopher J. Baronzzi  
Matthew G. Vansuch  
Jess T. Enyeart  
Stephen P. Kocon

*Of Counsel:*  
Harry R. Conn  
Bruce Birrell

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Cheap Tobacco IV, 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:

Kevin P Murphy

Name of Person

Harrington Hoppe & Mitchell, Ltd

Firm/Company

108 Main Avenue SW, Suite 500

Address

Warren, OH 44481

City/State and Zip Code

kmurphy@hhmlaw.com

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

For further information concerning this matter, please call:

Kevin P Murphy

Name of Person

at ( 330 )

392-1541

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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  
11 DEC 45 PM 2:26  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Cheap Tobacco IV, LLC

(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 were filed on 12/09/2010 and assigned  
Florida document number L10000126421.

This amendment is submitted to amend the following:

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

Winners Sweepstakes, LLC

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:

New Registered Office Address:

*Enter Florida street address*

*City*

*Florida*

*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:

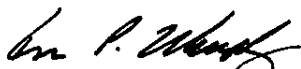
MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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			<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 \_\_\_\_\_



Signature of a member or authorized representative of a member

**Kevin P. Murphy**

Typed or printed name of signee