11000067093

(Requestor's Name)						
Sweepstakes of Florida UC - 6177 Elmgrove Ave Jacksonville, Fl 32244						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status	•					
Special Instructions to Filing Officer:						
	J					

Office Use Only



500212283125

10/11/11--01008--003 **25.00

2011 OCT 11 MAN H: 2.
SECRETARY OF STATE
ALLAHASSEE, FLORIO

T. CLINE

OCT 12 2011

EXAMINER

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

Sweepstakes of Florida LLC				
(Name of the Limited Liability Company as it now a (A Florida Limited Liability Comp	appears on o	our records.)		
The Articles of Organization for this Limited Liability Company were filed or	n Juni	e 8th 2011	and as	signed
Florida document number <u>L11000067093</u>				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liability compan	v here:			
The new name must be distinguishable and end with the words "Limited Liability C"L.L.C."	Company," tl	he designation "L	LC" or the	abbreviation
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRESS)		<u> </u>	SE SE	
		<u> </u>	SE 8	
Enter new mailing address, if applicable:		1.SSEE	ARY O	
(Mailing address MAY BE A POST OFFICE BOX)			S	
			HIA BIA	
B. If amending the registered agent and/or registered office address registered agent and/or the new registered office address here:	on our re	ecords, <u>enter th</u>	ie name (of the new
Name of New Registered Agent:		 		
New Registered Office Address:			W-17-	·
	Enter Florida street address			
	, Florida			
City			Zip Code	2
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>	Address	Type of Action
MGR	Richard A Christopherson	P.O. Box 1745 Glen ST. Mary's F1 32040	Add Remove
MGR	Mark Andes	55 Arapahoe Dr. Pensacola, Pl 32507	Add Remove
MGR	Edward S. Shields	Waynesbord Va 22980	Add Remove
MOR	Shannon Gahagan	3077 Stratford CT. Chesapeake va 23321	Add Resmove
MGR	Kimberleigh Shaebs	6183 Elmgrove Ave Jackson wile, FI 32244	OCTATION BELLEVIEW SEE FLORE
D. If ame	nding any other information, enter change(s) here: (Attach additional sheets, if necessary	Ren fle ve
_			
 Dated	Oct 6th , 2011		
	John Klu Signature of a member of	r authorized representative of a member	
	John W. Kilne Typed or	printed name of signee	· · · · · · · · · · · · · · · · · · ·
	4) pou oi	process tourist we display	

Page 2 of 2

Filing Fee: \$25.00