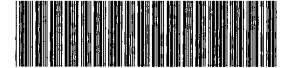
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(Re	questor's Name)	······
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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#### COVER LETTER

TO:

Registration Section
Division of Corporations

 $\mathbf{G}$ 

GAME-TIME + 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:

Brenda Duncar	ገ
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Name of Person

Render It

Firm/Company

901 Cayman W

Address

Venice, Fl. 34285

City/State and Zip Code

bbuffkin08@gmail.com

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

For further information concerning this matter, please call:

## Brenda Duncan

Name of Person

727 226-0093

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\*\*\* \*\*\*

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AND BEING OF BANK

# ARTICLES OF ORGANIZATION OF

GAME-TIME + LLC		<u> </u>	
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our record Liability Company)	<u>is.</u> )	
The Articles of Organization for this Limited Liability Company		and assigned	
Florida document number L12000015452			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company here:		
Render It LLC			
The new name must be distinguishable and end with the words "Lim "L.L.C."	ited Liability Company," the designa	tion "LLC" or the abbreviation	
Enter new principal offices address, if applicable:	901 Cayman W	7 2	
(Principal office address MUST BE A STREET ADDRESS)	Venice, Fl. 34285	70 13	
		皇 !!	
		32 6 F	
Enter new mailing address, if applicable:	901 Cayman W	Te a m	
(Mailing address MAY BE A POST OFFICE BOX)	Venice, Fl. 34285	0 <b>6</b>	
4		52 410	
' L. '	· · · · · · · · · · · · · · · · · · ·	***	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		nter the name of the new	
registered agent and/or the new registered office address ner	<u> </u>		
Name of New Registered Agent:	· · · · · · · · · · · · · · · · · · ·		
New Registered Office Address:			
	Enter Florida street address		
	, Flori		
The second secon	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.

or Managing	Member being added or removed from	n our records:	
MGR = Man MGRM = Ma	ager anaging Mëmber	AND STATE OF THE S	•
<u>Title</u>	<u>Name</u>	Address Salar Salar Salar	vpe of Action
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MGR	Chaundra Eversole	8109 Buttonball Ln.	_
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If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager

D. If ame	ending any other information, enter change(s) here:	(Attach additional shee			5 <b>3</b> - 80
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Dated		37 × 1	. Ke O'r	)	
	Bronda Duncan Signature of a member or authorize	red representative of a me	ember		
	Brenda Duncan	į, t			
	Typed or printed i	ianic of argice	• '		
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Rick Scott, Governor Ken Lawson, Secretary

April 29, 2013

Beth Ann Carlton 10808 Forest Run Dr Bradenton, FL 34211 FILE DE 122 2013 JUN -3 AM 8: 52

Re: Florida Real Estate Commission

Application Number: 3360806, Profession 2501

Dear Beth Carlton:

Thank you for being one of our valued licensees. We appreciate the opportunity to assist you in this matter.

We received your request which we are unable to complete for the following reason(s): You must be registered with the Florida Department of State, Division of Corporations. To use the PA/LLC designation in the real estate profession, as an individual you must register using your legal name. You may visit their website, <a href="https://www.sunbiz.org">www.sunbiz.org</a>, for more information. You may contact them by phone at 850.245.6000. Once you have completed the registration, resubmit your request.

If you submitted your application by mail or you are unable to submit the required documentation electronically you may either fax a copy of this letter along with your documents to 850.488.8040 or mail a copy of this letter and your documents to:

DBPR-Central Intake 1940 N Monroe Street Tallahassee, FL 32399-0783

Once we have received this information we will complete our review of your application. Your application will remain in an incomplete status until such time you have submitted all the requested information for review. In the meantime, if you would like to check the status of your application or have any questions, please visit our website at www.myfloridalicense.com. You may also contact the Department electronically by completing the form at <a href="https://www.myfloridalicense.com/contactus">www.myfloridalicense.com/contactus</a> or by calling 850.487.1395.

We look forward to working with you in the years ahead.

MS