L13000026374

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3 JUN 21 PH 3: 28
SECRETARY OF STATE
ALLAMASSEE FLORIDA

C. LEWIS
JUN 2 4 2013
EXAMINER

COVER LETTER

Division of Co			
	ack Creature Company,	Ľ¶L.C. ❤️	and the second s
SUBJECT:	Name of Limit	ted Liability Company	-
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Jason Michael Thom	nas	
		Name of Person	
	Black Jack Creature	Company, L.L.C.	
		Firm/Company	
	2309 Garden Chase		
		Address	
	Lakeland, Fl. 33812		
	Tigerfx@msn.com	City/State and Zip Code	
	E-mail address: (t	o be used for future annual report notificat	ion)
For further information of	concerning this matter, please ca	all:	
Jason Michael Thomas 863 738-5600			
Name o	of Person	Area Code & Daytime Te	elephone Number
Enclosed is a check for t	he 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

BILED

13 JUN 21 PA 3: 28 Black Jack Creature Company, L.L.C. (Name of the Limited Liability Company as it now appears on our records CRETARY OF STATE
(A Florida Limited Liability Company)

TALLAHASSEE. FLORIDA The Articles of Organization for this Limited Liability Company were filed on Febuary 19, 2013 Florida document number ______L13000026374 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Blackjack Creature Company, LLC The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." N/A Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) N/A 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: N/A Name of New Registered Agent: N/A New Registered Office Address: Enter Florida street address

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.

City

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 = Mar MGRM = M	nager Ianaging Member		
<u>Title</u>	<u>Name</u>	Address 13 nm 2	Type of Action
MGR	Jason Michael Thomas	2309 Gardege Chase Dr. STATE TALLAHASSEE, FLORIDA	Add
		Lakeland, Fl. 33812	Remove
MGRM	Jason Michael Thomas	2309 Garden Chase Dr.	Add
		Lakeland,Fl. 33812	Remove
			Add
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Dated	June 17 2013		· · · · · · · · · · · · · · · · · · ·	
	Caom Michae	Klam	_	
	Signature of a member or authorized Jason Michael Thomas	representative of a member		
	Typed or printed name	e of signee		
	Page 3 of	3		

Filing Fee: \$25.00