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ALLAHASSEE ELGEN.

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### **COVER LETTER**

TO: Registration Section
Division of Corporations

ຼ SWEEPSTAKES R US, 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 C YOVANOVICH

Name of Person

Firm/Company

1648 TAYLOR RD., SUITE 333

Address

PORT ORANGE, FL 32128

City/State and Zip Code

MIKEYOV2@CFL.RR.COM

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

For further information concerning this matter, please call:

MICHAEL C YOVANOVICH at (386) 308-1080

Name of Person

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

# (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 FEBRUARY 25, 2013 and assigned Florida document number L13000028706 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: INTERNET FUN CENTER, LLC The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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

New Registered Agent's Signature, if changing Registered Agent:

registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

SWEEPSTAKES R US. LLC

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

Enter Florida street address

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 = Ma MGRM = M	anager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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