

L14000166717

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

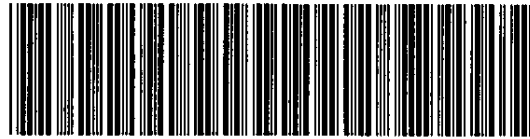
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L14-166717

NC + Amend

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JAN 16 2015

N. CAUSSEAU

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Entertap, 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:

Farraj M. Alrashdi
Name of Person

~~10644 Cory Lake Dr.~~ ENTERTAP, LLC
Firm/Company

10644 Cory Lake Dr.
Address

Tampa, FL 33647
City/State and Zip Code

farraj.alrashidi@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Farraj Alrashdi at (813) 992-2223
Name of Person 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 &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input checked="" type="checkbox"/> \$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**

Entertap, 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 Florida and assigned Florida document number L14000166717.

This amendment is submitted to amend the following:

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

ENTERTAP, 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)

17341 Morris Bridge Rd
Thornton, FL 33592

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 605, 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

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If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Farraj M. Alrasdi	L> 17341 Morris Bridge Rd. Thonotosassa, FL 33592	<input checked="" type="checkbox"/> Add
		L> 10644 Cory Lake Dr. Tampa, FL 33647	<input checked="" type="checkbox"/> Remove
AMBR	Saleh AlSafran	17341 Morris Bridge Rd. Thonotosassa, FL 33592	<input checked="" type="checkbox"/> Add
		17341 Morris Bridge Rd. Thonotosassa, FL 33592	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

- Remove the Address 10644 Cory Lake Dr. Tampa, FL 33647.
- Edit the Address ~~From~~^{to} 17341 Morris Bridge Rd. Thonotosassa, FL ~~33647~~³³⁵⁹².
From 17341 Morris Bridge Rd. Thonotosassa, FL 33592

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated 01/05/2015, _____

Farraj M. Alrashdi
Signature of a member or authorized representative of a member

Farraj M. Alrashdi
Typed or printed name of signer

Page 3 of 3

Filing Fee: \$25.00

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