L16000138398

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COVER³LETTER

	gistration Sec Vision of Corp			
SUBJECT:		G ENTERTAINMENT TECH	HNOLOGY LLC	
oobbac ii	.,	Name of Limi	ited Liability Company	
The enclosed	d Articles of A	mendment and fee(s) are sub-	mitted for filing.	
Please return	all correspon	dence concerning this matter	to the following:	
		NELSON C JOHNSON		
			Name of Person	
		STREAMING ENTERTAI	INMENT TECHNOLOGY LLC	
			Firm/Company	
		306 WEST FLORA STRE	ET	
			Address	
		TAMPA, FL 33604		
		SETTIVE DOLONG AND	City/State and Zip Code	· ·
		SETWEBS@GMAIL.COM	to be used for future annual report notifi	cation
F 6 1 :			·	canony
For lumner i	niormation co	ncerning this matter, please ca	ill:	
NELSON C	JOHNSON	•	813 465-3011	
	Name of	Person	at ()	Telephone Number
Enclosed is	a check for the	e following amount:		
\$25.00 1	•	□ \$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

STREAMING ENTERTAINMENT TECHNOLOGY 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 JULY 22, 2016 and assigned Florida document number L16000138398 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 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 registered agent and/or the new registered office address here: Name of New Registered Agent: 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 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

Florida _

Zip Code

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	NELSON C JOHNSON	306 WEST FLORA STREET	■ Add
		TAMPA, FL 33604	□ Remove
			Change
MGR	PAUL BUTTACAVOLI	8141 52ND LANE NORTH	Add
		PINELLAS PARK, FL 33781	■ Remove
			Change
		_	Add
			□ Remove
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Filing Fee: \$25.00

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