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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : NRAI SERVICES, LLC

Account Number : I20080000104 : (302)674-4089 Phone Fax Number : (302)674-5266

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: dmn@potamkinfamily.com

## REGISTERED AGENT CHANGE RMP GAMING, LIMITED PARTNERSHIP

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## LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida

1		MP Gaming, Limite				
N•	me of Limited Partnership	or Limited Liability Lie	mited Partnership			
2	01/11/2005	_ 3.	A05000000102			
Date of filing/registration in Florida			Florida document numi	her		
4. The name of the re Department of State:	gistered agent and the regi	stered office address as	shown on the records o	of the Florida		
	[	Pavid Yusko				
•		Name	<del></del> ,	•		٠
	5800	NW 171st Street				
		Address				
	Mir	ami, FL 33015				
	City	, State and Zip		6/A		
5. The name and Flor	ida street address of the ne	w registered agent and/	or office:		2021 JUN 25	
	NRAI Services, Inc.				Ē	
		Name		د بن د بن	P.3	_
	1200 South Pine Island R	oad		्रिते∺t स्वरू		LED
	Florida street addr	ess (P.O. Box not accep	table)	. <del>•</del> •:	×	O
	Plantation,	ri :	33324	83	Ö	
	City	, State and Zip	<del></del>	5	57	
6. Such change(s) is/e	re effective when filed by	the Florida Department	of State.			
Me Han Signature of General I	Partner					
comply with the provide	pointment as registered ag tions of all statutes relative can accept the bligations d Agent	to the proper and comp	olete performance of m			
Filing Fee: Certifled Copy (o	\$35.00 ptional): \$52.50					