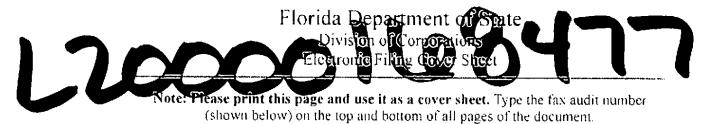
11/3/2020

Division of Corporations



(((H200003815173)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : BUSINESS FILINGS Account Number : 105256001620 Phone : (608)827-5300 Fax Number : (608)827-5501

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

Email Address: kfranco@ccmcgs.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN COLLEGE AVE. DISTRICT LICENSE, LLC

Certificate of Status	0
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Help

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION `

COLLEGE AVE. DISTRICT LIC	ENSE, LLC				
(Name of the Lim	ted Liability Company as it now a (A Florida Limited Liability Comp	appears on our records.)			
The Articles of Organization for this Limited Liability Company were filed on 6/23/2020		on 6/23/2020	and assigned		
Florida document number L20000168477	·		·		
This amendment is submitted to amend the fol	lowing:				
A. If amending name, enter the new name of	of the limited liability compa	ny here:			
The new name must be distinguishable and contain the	words "Limited Liability Company,"	"the designation "LLC" or the abb	reviation "L.L.C."		
Enter new principal offices address, if appli	cable:				
(Principal office address MUST BE A STREET ADDRESS)			020 NO		
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			ئے نے نے		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)					
		["	: 20 50 50 50 50 50 50 50 50 50 50 50 50 50		
B. If amending the registered agent and/or agent and/or the new registered office address.	registered office address on e ss here:	our records, <u>enter the name</u>	,		
Name of New Registered Agent:	Business Filings Incorporate	ed			
New Registered Office Address:	1200 South Pine Island Road	ď			
	Ente	er Florida street address			
	Plantation	, Florida ³³³ .	24		
	City		Zıp 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

Mark Williams, AVP, Business Filings Incorporated

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>	Address	Type of Action
MGR	MATEER, CRAIG	615 E. HARDING ST.	
		ORLANDO, FL 32806	
			DChange
MGR	Act Up Entertainment LLC	615 E. HARDING ST.	
		ORLANDO, FL 32806	□Remove
MGK	Wolf Hospitality Group, LLC	2001 Thomasville Road	≣A@
		Tallahassee, Florida 32308	■ AGG
			Change
			□Remove
			OChange
•			DAdd
			□Remove
			CChange
			□Add
			Remove
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