M210003161

(Re	questor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Ĉi	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
•	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
	Office Use Onl	ıv.



900400521299

2023 FEB 13 PM 1: 10

ALL ABASSES, HOLL

2023 JAN 27 PH 4: 09

Q 2/14/2023

CT CORP

3458 Lakeshore Drive, Tallahassee, FL 32312 850-656-4724

D	ate:	02/13/20	22	
		Acc#I20	160000072	- w: DW
Name:	Oche Fran	chise LLC	†	
Document #:				
Order #:	14746824	- 16		
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good				
Standing: Certified Copy of				
Apostille/Notarial Certification:		Country of Number of	Destination: Certs:	
Filing: 🗸	Certified Plain: COGS:			Email Address for Annual Report Notifical
Availability Document Examiner Updater Verifier W.P. Verifier Ref#	Amount	\$ 55.00	0	
		Than	k you!	

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: OCHE SE LLC	
Name of Foreign Limited Lia	bility Company
Dear Sir or Madam:	
The enclosed application, certificate and fee(s) are submitted	for filing.
Please return all correspondence concerning this matter to the	e following:
Diana Delecaris	
Name of Person	_
Greensfelder, Hemker & Gale, P.C.	
Firm/Company	_
10 S Broadway, Suite 2000	
Address	_
St. Louis, MO 63102	
City/State and Zip Code	_
legal@thesocialgaminggroup.com	
E-mail address: (to be used for future annual report notific	cation)
For further information concerning this matter, please call:	
at (
Name of Person Area Cod	le & Daytime Telephone Number
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the following amount:	
□\$25 Filing Fee □ \$30 Filing Fee & \$55 Filin	g Fee & 🗆 \$60 Filing Fee,
Certificate of Status Certified	<u> </u>
CR2E055 (9/15) .	

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

2023 JAN 27 PM 4:1

SECTION I (1-4 must be completed)
1. Name of limited liability Company as it appears on the records of the Florida Department of State: OCHE SE LLC
Enter new principal office 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)
2. The Florida document number of this limited liability company is: M21000003161
3. Jurisdiction of its organization: Delaware
4. Date authorized to do business in Florida: 03/05/2021
SECTION II (5-9 complete only the applicable changes)
5. New name of the limited liability company: The Social Gaming Group US, LLC (must contain "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")
6. If amending the registered agent and/or registered officer 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 , Florida
City 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

If the amendment cl	hanges person, title or capacity in a	secordance with 605.0902 (1)(e), indicate that cha	nge:
itle/ Capacity	Name	Address Tyr	e of Action
			_ □Ađd
			□Remov
			□Add
			□Remo
			□∧dd
			□Remo
			_ □Add
			_ □Remo
			_ □Add
aforementioned am	ficate, if required: no more than 90 nendment(s), duly authenticated by the law of which this entity is orga	y the official having custody of records in the	_ 🗀 Rетю
	- 0	the authorized representative	
aforementioned am	nendment(s), duly authenticated by the law of which this entity is orga For L Signature of Jarle Jensen, Manager	y the official having custody inized.	

Filing Fee: \$25.00

Delaware

Page 1

The First \$tate

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY THAT THE SAID OCHE SE, LLC, FILED

A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO THE SOCIAL

GAMING GROUP US, LLC, ON THE TWENTY EIGHTH DAY OF APRIL, A.D.

2022, AT 2:27 O'CLOCK P.M.

7840664 8320 SR# 20230347053 Authentication: 202628869

Date: 02-02-23

You may verify this certificate online at corp.delaware.gov/authver.shtml