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2017 DEC -8 AM 10: 21

Amend

DEC 1 1 2017

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Hard Rock Cafe Ir	nternational (Orlando), Inc.			
DOCUMENT NUM					
	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	Erica Pallaron				
		Name of Contact Person	1		
	Hard Rock Cafe International				
		Firm/ Company			
	6100 Old Park Lane				
	Address				
•	Orlando, Florida 32835				
		City/ State and Zip Cod	ε		
erica	.pallaron@hardrock.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further informatio	n concerning this matter, pleas		445-7636		
	50	at (407)		
Name	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	or the following amount made	payable to the Florida Depa	irtment of State:		
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			

Articles of Amendment to Articles of Incorporation of

(Name of Corporation	as currently filed	with the Florida I	Dept. of State)		
Hard Rock Cafe International (Orlando), Inc.	2491	X			
(Documer	nt Number of Corpo	oration (if known)			
Ç. T. IIII.		(
Pursuant to the provisions of section 607.1006, Florida S its Articles of Incorporation:	Statutes, this <i>Florid</i> e	a Profit Corporatio	n adopts the fo	ollowing ame	ndment(s)
A. If amending name, enter the new name of the corp	poration:				
				Th_{ν}	new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the ab	"Inc," or "Co".			the abbrev	iation
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDR</u>	<u>—</u>				
				~	
	_	<u> </u>		<u> </u>	
					7
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX))				
(100 100 100 100 100 100 100 100 100 100	·				5
					<u>. 17</u>
				7,	
				= -	E S
D. If amending the registered agent and/or registered		Florida, enter the	name of the	事	-
new registered agent and/or the new registered of	fice address:				
Name of New Registered Agent					
					
	(Florida street add	w.u.a.l			
	(Fiorna sireei aaa)	(103)			
New Registered Office Address:			, Florida		
	(City)			(Zip Code)	
New Registered Agent's Signature, if changing Regist					
I hereby accept the appointment as registered agent. I a	am familiar with an	d accept the obliga	tions of the pos	sition.	
					
Signati	ura of New Ragister	ed Samu if chanci	at cz		

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	PT John I	Doc	
X Remove	<u>V</u> <u>Mike</u> .	Jones .	
X Add	<u>SV</u> <u>Sally S</u>	<u>Smith</u>	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	Director	Hamish Alexander Dodds	8288 Tibet Butler Drive
Add			Windermere, FL 34786
Remove			
2) Change			
· Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
δ) Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
<u> </u>	
- 	
	-
f an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:
	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	· · · · · · · · · · · · · · · · · · ·	
Effective date if applicable:	12/4/2017	
Enective date in applicable.	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this date Department of State's records.	e will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the amendment(s) e sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	ıt
"The number of votes of	east for the amendment(s) was/were sufficient for approval	
by		
- 	(voting group)	
■ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
. 12/4/20 Dated	A 11/02/20	
sele	a director president or other officer – if directors or officers have not been extend by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	
	Jay Anthony Wolszczak	
	(Typed or printed name of person signing)	
	Vice President / Secretary	
	(Title of person signing)	