L06000115257

(Requ	estor's Name)	
(Addr	ess)	
(Addr	ess)	. <u> </u>
(City/s	State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(Busin	ness Entity Name)	
(Доси	ment Number)	<u> </u>
Certified Copies	Certificates of	Status
Special Instructions to Fil	ing Officer;	
<u>Sign W18-</u>	-842	

Office Use Only



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01/03/18--01021--020 **30.00

SECRETARY OF STATE DIVISION OF CORPORATIONS

K SALY JAN 19 2018

COVER LETTER

SUBJECT:	Name of Lim	ited Liability Company		
		,		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Donald Campbell			
		Name of Person		
	VI Ventures LLC			
		Firm/Company		
	12105 28th Street N, Bldg C			
	Address			
	St Petersburg, FL 33716			
	dcampbell@thepokerdepot.	City/State and Zip Code		
	, -, ,	to be used for future annual report notif	ication)	
For further information c	oncerning this matter, please ca	alt:		
Donny Campbell		727 8272027 at () _		
Name o	f Person		Telephone Number	
Enclosed is a check for the	ne following amount:			
□ \$25.00 Filing Fee	■ \$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:

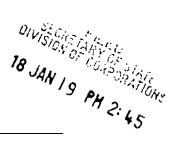
TO: Registration Section

Division of Corporations

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



The Poker Depot, LLC	
(<u>Name of the Limited Liability Comp</u> (A Florida Limited	nany as it now appears on our records.) I Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number L06000115257	y were filed on December 4, 2006 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lial	bility company here:
VI VENTURES LLC	
The new name must be distinguishable and contain the words "Limited Liab	pility 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)	<u> </u>
D. If amounting the assistant and analysis and a	
B. If amending the registered agent and/or registered e registered agent and/or the new registered office address her	
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	emer rioriaa sirvei aaaress

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.

City

If Changing Registered Agent, Signature of New Registered Agent

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	Michelle M Campbell	12105 28th Street N	
	St Petersburg, FL 33716	■ Remove	
		Change	
	 		
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			Change
			
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	nd cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (2 meet the applicable statutory filing requirements, this date will not be listed as the
e record specifies a delayed effective of The 90th day after the record is filed	date, but not an effective time, at 12:01 a.m. on the earlier of:
December 30	2017
Signature of a	member or authorized representative of a member
Donald G Campbell VI	
·	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 4, 2018

THE POKER DEPOT, LLC DONALD CAMPBELL 12105 28TH ST. N, BLDG C ST. PETERSBURG, FL 33716

SUBJECT: THE POKER DEPOT, LLC

Ref. Number: L06000115257

We have received your document for THE POKER DEPOT, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly Regulatory Specialist II

Letter Number: 518A00000252