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SECRITAKY OF STATE ALLAHASSEE FLORIDA

TILED

COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT: R	B GAME (Name of Limi	Solutions LL (ted Liability Company)	<u>. C</u>
The enclosed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	·
Please return all correspon	dence concerning this matter	to the following:	
		J. DRYE (Name of Person)	
	RtB B	(Firm/Company)	s LLC
	<u>4771</u>	BAYOU Blog	1 #289
	CE115AC	City/State and Zip Code)	03
For further information co	ncerning this matter, please ca		2 -
(Name of	Person)	at (<u>850)</u> <u>748</u> (Area Code & Daytime T	elephone Number)
Enclosed is a check for the	e 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

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

(additional copy is enclosed)

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

FILED

08 JUN 30 PM 2: 76

SECRETARY OF STATE TALL AHASSEE FLORIDA

. .	IALEAHAGGE TEGHIBA
R+B GAME SOI	ations LLC
(Name of the Limited Liability Comp (A Florida Limited	pany as it now appears on our records.) d Liability Company)
,	-landant
The Articles of Organization for this Limited Liability Compa	ny were filed on 5/07/2008 and assigned
Florida document number <u>LD 80000 460/9</u> .	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lis	ability company here:
The new name must be distinguishable and end with the words "Li "L.L.C."	mited Liability Company," the designation "LLC" or the abbreviation
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)	4771 BAYOU Blud #289 PENSACOLA, 7L 32503
B. If amending the registered agent and/or registered registered agent and/or the new registered office address he	office address on our records, <u>enter the name of the new</u> ere:
	AROL J. DRYC
New Registered Office Address: 47	71 BAYOU Blud #289 (Enter Florida street address)
_Pen	5alon 94 Florida 92503
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen	it:

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 608, 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 amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	ROGER E DRYE	4960 Highway 90 Suite 118 PACE 174 32-571	Add P-Remove
MGR	CAROL J DRYC	4771 BAYOU BIUD # 289 PEUSACOIA, 71 32503	Add Remove
	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	Add Remove
	, <u>.</u>		Add Remove
	·		Add Remove
			Add Remove
D. If amendi	ng any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary.,) ——
			<u> </u>
Dated /	ne 27th, 20	08	FILE! 08 JUN 30 PM SECRETARY OF TALLY AHASSEE!
Daleu	Pote	or authorized representative of a member	30 PM 2: 76
-	Typed	or printed name of signee	2: 76 STATE

Page 2 of 2

Filing Fee: \$25.00