## 8000/12223

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Certified Copies	Certificates	s of Status
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## **COVER LETTER**

TO:

Registration Section Division of Corporations

SUBJECTS

## INTERNET ROYALE CAFE, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Lisa Waltrip

Name of Person

INTERNET ROYALE CAFE, LLC

Firm/Company

1368 E. Howard Street

Address

Live Oak, FL 32060

City/State and Zip Code

lisawaltrip102@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lisa Waltrip

ູ,386,365-5900

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the 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:** 

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

INTERNET ROYALE CAFE, LLC		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our Liability Company)	records.)
The Articles of Organization for this Limited Liability Company	were filed on 12/09/200	8 and assigned
Florida document number L08000112223		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
Internet Royale Arcades, LLC.		
The new name must be distinguishable and end with the words "Lim"L.L.C."	ited Liability Company," the o	designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	1368 E HOWARD S	ST
(Principal office address MUST BE A STREET ADDRESS)	Live Oak, FL	<i>\$</i> . №
	32060	
		in E 7
Enter new mailing address, if applicable:		\$355 \$355 \$355
(Mailing address MAY BE A POST OFFICE BOX)		# <b>3</b>
		5 C
B. If amending the registered agent and/or registered of		···
registered agent and/or the new registered office address her	<u>'e</u> :	
Name of New Registered Agent:		
New Registered Office Address:		<u> </u>
	Enter Flori	da 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 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 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	
			Add	
			Remove	
			Add	
			Remove	
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		ORIO BRID	Add  Add  Remov	

D. If amending any other info	rmation, enter change(s) here: (Attach additional sheets, if necessary.)
* · · ·	
Dated July 22	2013
	ANIX)
	Signature of a member or authorized representative of a member
Lisa Waltrip	
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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TO