(Red	questor's Name)			
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V.	,			
(City	//State/Zip/Phone	∍#)		
PICK-UP	☐ WAIT	MAIL		
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Certified Copies	Certificates	of Status		
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## **CORPORATE FILING SERVICE**

3320 SW 87<sup>TH</sup> AVENUE

MIAMI, FL 33165 (305) 552-5973

	Office Use O	nly
RPORATION NAME(S) & DOCUM	ENT NUMBER(S), (if known):	
GAMES TO	) 60, L.L.(, )	
	•	
(Corporation Name)	(Document #)	·
(Corporation Name)	(Document #)	<del> </del>
(Corporation Name)	(Document #)	<del></del>
Walk in Pick up time	.00 Certi	ified Copy
☐ Mail out ☐ Will wait	Photocopy Cert	ificate of Status
EW FILINGS	AMENDMENTS	
Profit Not for Profit	Amendment Resignation of R.A., Officer Change of Registered Agent	
Limited Liability Domestication Other	Dissolution/Withdrawal  Merger	
OTHER FILINGS	REGISTRATION/QUALIFIC	ATION
Annual Report Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other	
,		
	Exami	iner's Initials

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	<u>GAN</u>	<u>MES TO</u>	GO, LLC		·	
(Na	me of the Limited Liabili (A Florid	<b>ity Compar</b> a Limited L	iy as it now appears on iability Company)	our records.		
The Articles of Organization	1 00000105001	Company	were filed on	10/30/2009	and as	signed
This amendment is submitted	to amend the following:					
A. If amending name, <u>enter</u>	the new name of the li	mited liabi	ility company here:			
The new name must be distingu "L.L.C."	ishable and end with the w	vords "Limi	ted Liability Company,"	the designation "I	LC" or the	abbreviation
Enter new principal offices	address, if applicable:					
(Principal office address MU	<u>IST BE A STREET ADI</u>	DRESS)				···
				<u> </u>		
Enter new mailing address, (Mailing address MAY BE A						
B. If amending the regist registered agent and/or the				records, enter (	the name	of the new
Name of New Regis	stered Agent:					
New Registered Off	ice Address:					
			Enter 1	Florida street ada	ress	
				, Florida		<del></del>
			City		Zip Coo	le
New Registered Agent's Signa	ture, if changing Registe	red Agent:				
I hereby accept the appoint the provisions of all statutes accept the obligations of my being filed to merely reflect company has been notified	s relative to the proper v position as registered a change in the registe	and comp agent as p cred office	lete performance of n provided for in Chapt	ny duties, and <b>F</b> er 608, F.S. O <b>y,</b>	m fandia Fthis Boo	r with and u <b>men</b> j is
		If Char	nging Registered Agent, S			nt I
		Page 1	of 2	LO2	ATS   :9	O:

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

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	ADEL AWAD	3300 NW 112TH AVE UNIT 6 DORAL, FL 33172	Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
<u>.</u>			Add Remove
D. If amend	ing any other information, enter change	e(s) here: (Attach additional sheets, if necessary.)	
			<del></del>
	ADDII OF	10	<del>-</del>
Dated	APRIL 25 201	12	
	/ Jivio	or authorized representative of a member  WERTER  or printed name of signee	
	/ .,,,,,,,,	•	

Page 2 of 2