Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : FASTKIT CORP Account Number : I20100000009 : (305)599-0839 Phone : (305)592-9591 Fax Number

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

\$LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MIAMI SLOT SALES LLC

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Page Count	02
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SEP - 7 2010



ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SECRETARY OF STATE
SIVISION OF CORPORATIONS
10 SEP -3 AM 7:58

	<u>IMI SLOT</u>	SALES LLC		S
(Name of the Limited Li	ability Compa orida Limited L	ny as it now appears liability Company)	on our records.)	
The Articles of Organization for this Limited Liab. Florida document numberL100000393		were filed on	9/3/10	and assigned
This amendment is submitted to amend the follow	ing:			
A. If amending name, <u>enter the new name of th</u>	re limited liab	ility company here	•	
The new name must be distinguishable and end with the L.L.C."	he words "Limi	red Liability Compan	y," the designation "I	LC" or the abbreviation
Enter new principal offices address, if applicabl	le:	1200 BRICKE	L AVENUE	
Principal office address MUST BE A STREET ADDRESS)		SUITE 1950		
		MIAMI, FL 331	31	
Enter now mailing address, if applicable:		1200 BRICKE	L AVENUE	
Mailing address MAY BE A POST OFFICE BOX		SUITE 1950		·
		MIAMI, FL 331	31	
B. If amending the registered agent and/or registered agent and/or the new registered office			r records, <u>enter t</u>	he name of the ne
Name of New Registered Agent:				
New Registered Office Address:	1360 SOUT	H DIXIE HWY S	UITE 355 r Florida street add	ress
	COF	RAL GABLES	Florida	33146
•		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 filled 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.

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MGR = Manager

MGRM = Managing Member

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

Title	<u>Name</u>	Address	Type of Action			
MGRM	ROBERT RONEC	2700 LAS VEGAS BLVD UNIT 1204 LAS VEGAS, NV 89109	Add Remove			
~ ~~~			Add Remove			
,	· .		Add Remove			
· 			Add Remove			
			Add Remove			
			Add Remove			
D. If amendin	g any other information, enter change(s) here: (Attach additional sheets, if necessary.)	. NAIG			
			SION OF CO			
Dated	September 3rd , 2010	2	Y OF STATE CORPORATIONS			
_		suthorized representative of a member				
ALDO ANDREU Typed or printed name of signee						

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Filing Fee: \$25.00