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 : 120100000009 Phone : (305)599-0839 Fax Number : (305)592~9591

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

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

| Certificate of Status | 0_ |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 03 |
| Estimated Charge | \$25.00 |

Electronic Filing Menu Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

::.

| MIAMI SLOT SALES | | |
|---|--|--|
| (Name of the Limited Linbilly Company as it (A Florida Limited Liability | new appears on our records.) Company) | |
| The Articles of Organization for this Limited Liability Company were stronged document number <u>L10000</u> 039332 | Sled on 4/12/2010 | and essigned |
| Promote ducimient municer | | |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limited Hability co | myany here | |
| The new name must be distinguishable and end with the words "Limited Lia". L.C." | bility 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: | | |
| | | |
| B. If amending the registered agent and/or registered office as | idress on our records, <u>ente</u> | e the name of the ner |
| B. If amending the registered agent and/or registered office as | idress on our records, <u>ente</u> | r the name of the ne |
| B. If amending the registered agent and/or registered office acceptance agent and/or the new registered office address here: Name of New Registered Agent: | idress on our records, <u>ente</u> | r the name of the new |
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| B. If amending the registered agent and/or registered office ac registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: | Enter Plorida street o | 2ddress |
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| B. If amending the registered agent and/or registered office as registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: City New Registered Agent's Signature, if changing Registered Agent: [hereby accept the appointment as registered agent and agree to the provisions of all statutes relative to the proper and complete paget the obligations of my position as registered agent as provided being filed to merely reflect a change in the registered affice address | Enter Florida street of Florida Florida The street of th | Zip Code Zip Code agree to comply with If am familiar with and Or, if this document is limited liability |
| B. If amending the registered agent and/or registered office acregistered agent and/or the new registered office address here: New Registered Office Address: New Registered Office Address: City New Registered Agent's Signature, if changing Registered Agent; I hereby accept the appointment as registered agent and agree to a the provisions of all statutes relative to the proper and complete passengs the obligations of my position as registered agent as provided being flied to merely reflect a change in the registered office addrescompany has been notified in writing of this change. | Enter Plorida street of Florida Florida set in this capacity. I further of the formance of my duties, and the following that the set, I hereby confirm that the | Zip Code Zip Code agree to comply with and or, if this document is limited liability. |
| New Registered Office Address: City New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent and agree to the provisions of all statutes relative to the proper and complete page accept the obligations of my position as registered agent as provided in filed to merely reflect a change in the registered office address company has been notified in writing of this change. | Enter Florida street of Florida Florida The street of th | Zip Code Agree to comply with I am familiar with and Or, if this document is limited liability in the Resistant Ages 25 |
| B. If amending the registered agent and/or registered effice as registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: City New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent and agree to the provisions of all statutes relative to the proper and complete maccept the obligations of my position as registered agent as provided being filled to marely reflect a change in the registered office address company has been notified in writing of this change. | Enter Plorida street of Florida Florida set in this capacity. I further of the formance of my duties, and the following that the set, I hereby confirm that the | Zip Code agree to comply with I I am familiar with and Or, if this document is limited liability Revisional Actol |

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

MGR = Manager
MGRM = Managing Member

Title Name Address Type of Action

| TIME | TABLE | MINISTER | ATPE OF ACCOUNT |
|---------------|---------------------------------------|-------------------|-----------------|
| MGRM | Arturo Castillo | 1200 BRICKELL AVE | Add |
| | . ` | STE 1950 | Remove |
| | | MIAMI, FL 33131 | |
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| antending any other i | nformation, enter change(s) here: (Attach additional sheets, if incorsory.) |
|-----------------------|---|
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| | |
| May 10 | 2013 |
| | |
| - | Signature of a theoriter of numberial interpretations of a marrial |
| | Aldo Andreu |
| · | Typed or printed name of signes |
| | Page 3 of 3 |

Filing Fee: \$25.00