

LS000074491

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

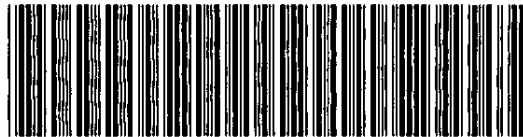
(Business Entity Name)

(Document Number)

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: 4Play Gentlemans Lounge, 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:

Adam Miller

Name of Person

4Play Gentlemans Lounge LLC

Firm/Company

5447 Haines Rd #254

Address

St. Petersburg, FL 33714

City/State and Zip Code

usaauctioninc@gmail.com

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

For further information concerning this matter, please call:

Adam Miller

813 2250208
at ()

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**

4Play Gentlemans Lounge LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 4/28/2015 and assigned
Florida document number L15000074491.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

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)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida 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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Adam Miller	5447 Haines Rd #254	<input checked="" type="checkbox"/> Add
		St Petersburg, FL 33714	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Patrick McLain	5447 Haines Rd #254	<input type="checkbox"/> Add
		St Petersburg, FL 33714	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated July 20th, 2015

Adam S Miller

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Filing Fee: \$25.00

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS**Detail by Registered Agent Name****Florida Limited Liability Company**

4PLAY GENTLEMANS LOUNGE LLC

Filing Information

Document Number	L15000074491
FEI/EIN Number	NONE
Date Filed	04/28/2015
Effective Date	04/27/2015
State	FL
Status	ACTIVE

Principal Address

10387 GANDY BLVD
106
ST PETERSBURG, FL 33702

Mailing Address

5447 HAINES RD
254
ST PETERSBURG, FL 33714

Registered Agent Name & Address

MILLER, ADAM S
5447 HAINES RD
254
ST PETERSBURG, FL 33714

Authorized Person(s) Detail**Name & Address**

Title MGR

MCCLAIN, PATRICK C
5447 HAINES RD SUITE 254
ST PETERSBURG, FL 33714

Title AP

MILLER, ADAM
5447 HAINES RD SUITE 254
ST PETERSBURG, FL 33714