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## **COVER LETTER**

TO: Registration Section Division of Corporations ADVENTUROUS ENTERTAINMENT LLC SUBJECT: \_ 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: MONICA DIAZ Name of Person Globally USA Corp. Firm/Company 7205 Nw 19Th St. Suite 401 Address Miami / Florida, 33126 City/State and Zip Code Admn@globallyusa.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Maria Gomez 980 8994303 Daytime Telephone Number Area Code Name of Person Enclosed is a check for the following amount: ■ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status & Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

Mailing Address:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address:

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ADVENTUROUS ENTERTAINMENT LLC

( <u>Name of the Limited Liat</u> (A Flor	oility Compa ida Limited	any as it now appears ( Liability Company)	on our records.)	2022
The Articles of Organization for this Limited Liability Florida document number	<del></del> ,	were filed on	06/28/2016	and assigned
A. If amending name, enter the new name of the li DEEPFI LLC		oility company here	;:	AM II: 08
The new name must be distinguishable and contain the words "I	imited Liabi	lity Company," the des	gnation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)		7205 Nw 19Th St. MIAMI, FL 33120		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		7205 Nw 19Th St,		
B. If amending the registered agent and/or registe agent and/or the new registered office address here		address on our rec	ords, enter the na	ime of the new registered
Name of New Registered Agent:  AM	ERICAN P	ARTNER SERVICES	S CORP	
•	5 NW 19TF	4 ST SUITE 401		
	Enter Florida street address			
MI	\MI		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.

f 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>	Address	Type of Action
	1	·	□Add
			□Remove
			□Change
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			□Remove
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	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(If an effi <u>Note:</u>	ve date, if other than the date of filing:
If the rec (b) The	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated.	June 28 2022
	Agna Shora bones Pardenas Pardenas
	MARIA GOMEZ
	Mana Silvana Gomes Cardenas