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J SHIVERS



## ALEXANDER LAW, P.A.

Main Office: 8380 Bay Pines Blvd., 2<sup>nd</sup> Floor • St. Petersburg, Florida 33709 • Phone: 727.384.6424 • Fax: 727.384.0882 • [www.smalexanderlaw.com](http://www.smalexanderlaw.com)

\*\*Scott M. Alexander, Esq.

\*\*Former Prosecutor

\*\*Donald P. Simon, Esq.

Vitas J. Lukas, Esq.

May 30, 2017

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

Re: *Action Gaming, LLC*  
*Amended Articles of Organization*

Dear Sir or Madam:


Enclosed please find Amended Articles of Organization for Florida limited liability company, Action Gaming, LLC and a check in the amount of \$25.00 made out to Florida Department of State. Kindly file the company's Amended Articles upon receipt.

My daytime contact number is (727) 384-6424 and my firm's address is:

Alexander Law, P.A.  
8380 Bay Pines Blvd.  
2nd Floor  
St. Petersburg, FL 33709

Thank you for your timely attention to this matter. Please feel free to contact my office with any questions or concerns you may have.

Sincerely,



Scott M. Alexander, Esq.

SMA/rar  
Enclosure

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: ACTION GAMING, 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:

Scott Alexander  
Name of Person  
Alexander Law, PA  
Firm/Company  
8380 Bay Pines Blvd, 2nd Floor  
Address  
St Petersburg, FL 33709  
City/State and Zip Code  
scott@smallalexanderlaw.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Scott Alexander at (727) 384-6424  
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**

ACTION GAMING, 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 5/3/17 and assigned  
Florida document number 617000098271.

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>
AMBR	STEP 2 ARCADE, LLC	12561 Uimerton Road	<input checked="" type="checkbox"/> Add
		Largo, FL 33774	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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17 JUN - 1 AM 7:43  
SECRETARY OF STATE  
ALABAMA, FLORIDA

17 JUN - 1 AM 7:43  
SECRETARY OF STATE  
ALLAHABAD, FLORIDA

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:**  
**(b) The 90th day after the record is filed.**

Dated 5/23/17, \_\_\_\_\_

Signature of a member or authorized representative of a member

Scott Alexander  
Typed or printed name of signee