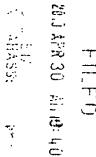
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(Requ	estor's Name)	
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(City/S	State/Zip/Phon	e #)
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(Busin	ess Entity Na	me)
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Certified Copies	Certificate	s of Status
Special Instructions to Fili	ing Officer:	

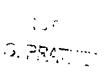
Office Use Only

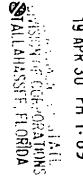


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RECEIVED

COVER LETTER

Divi	ision of Corp	orations	· N	
SUBJECT:	Game Day S	ubs VII, LLC		
SUBJECT.			ed Liability Company	
The enclosed	Anicles of A	mendment and fee(s) are subm	nitted for filing.	
Please return	all correspon	dence concerning this matter to	o the following:	
		Kimberly Crowell		
			Name of Person	
		Kalo Companies		
		-	Firm/Company	
2001 Thomasville Road, Suite B300				
			Address	
		Tallahassee, FL 32308		
			City/State and Zip Code	
		kcrowell@kalorestaurantgro	up.com be used for future annual report notifi	
For further in	nformation co	ncerning this matter, please cal	•	cation)
Kimberly Cr	owell		850 228-7350 at ()	
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed is a	check for the	following amount:		
■ \$25.00 F	iling 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:

TO:

Registration Section

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

Game Day Subs VII, LLC		医原 光 兰
(<u>Name of the Limited Liabil</u> (A Florid	ity Company as it now appears on our records la Limited Liability Company)	
The Articles of Organization for this Limited Liability (Company were filed on August 1, 2017	and assigned
Florida document number L17000163828		+0
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the lim</u>	nited liability company here:	
K & A Subs Lynn Haven, LLC		
The new name must be distinguishable and contain the words "Lir	nited 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 ADD	PUSS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or regi	stered office address on our records	s, enter the name of the ne
registered agent and/or the new registered office add		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addres:	ŗ.
	Flo	orida
	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>	Type of Action
			□ Remove
			Change
			
			Remove
			Change
			Add
			□ Remove
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Tective date, if other that an effective date is listed, the date inserted in to other. If the date inserted in to cument's effective date on	ite must be specific a his block does no	and cannot be prior of meet the applica	to date of filing or mable statutory filin	ore than 90 days after	onal) r filing.) Pursua s date will no	nt to 605.020° t be listed as
record specifies a del The 90th day after the	ayed effective record is file	e date, but not d.	t an effective t	ime, at 12:01 a	a.m. on the	e earlier o
ted April 24		2 019				
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•	Ly Crow Signature of	a member or autho	rized representative	of a member	25 G G G	TANGO AN

Page 3 of 3

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