

Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850) 617-6383

From:
Account Name : VCORP SERVICES, LLC
Account Number : 120080000067
Phone : (845) 425-0077
Fax Number : (845) 818-3588

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

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
ROYAL 20 AVE LLC

Certificate of Status	0
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Page Count	04
Estimated Charge	\$25.00

11/15/2017 12:17 PM

11/15/2017 8:19 AM

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Royal 20 Ave 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 08/08/2017 and assigned
Florida document number L17000169215.

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:

2800 Island Blvd, Apt 302

(Principal office address MUST BE A STREET ADDRESS)

Aventura, FL 33160

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

City

Florida

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	Royal Lanes Bowling Inc.	2800 Island Blvd, Apt 302	<input checked="" type="checkbox"/> Add
		Aventura, FL 33160	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Neville Woolf	44 ROBINGROVE RD	<input checked="" type="checkbox"/> Add
		Toronto, Ontario M2R 2Z9	<input type="checkbox"/> Remove
		CANADA	<input type="checkbox"/> Change
AMBR	Sharon Woolfe	44 ROBINGROVE RD	<input type="checkbox"/> Add
		Toronto, Ontario M2R 2Z9	<input checked="" type="checkbox"/> Remove
		CANADA	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

49. 01. 1949

E. Effective date, if other than the date of filing: _____ (optional)
(If an effective date is listed, the date must be on or after _____)

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

Notes: 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.

(b) The 90th day after the record is filed.

Dated November 14 2017

S. Woods / PRESIDENT ROYAL LANES BOWLING INC
Signature of a member or authorized representative of a member

SHARON WIDOLF/PRESIDENT ROYAL LANES BOWLING INC
(typed or printed name of signer)