

L170001779104

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

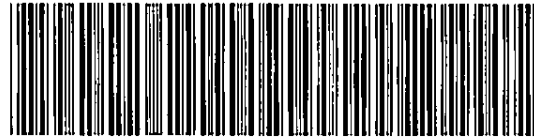
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

D SCOTT
NOV 14 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: _____

Royal Knights Poker, 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:

Evan Rupley

Name of Person

Firm/Company

7517 Hidden Hollow Drive

Address

Orlando, FL 32822

City/State and Zip Code

RoyalKnightsEvents@gmail.com

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

For further information concerning this matter, please call:

Evan Rupley

Name of Person

at (407)

Area Code

592-9207

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

FILED
2017 NOV 13 PM 3:51
TALLAHASSEE, FL

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Royal Knights Poker, 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 Aug 21, 2017 and assigned
Florida document number L 17000177904

This amendment is submitted to amend the following:

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

Royal Knights Events, LLC

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>
CEO	Ricardo Sabates	7513 Georgia Peach Dr	<input type="checkbox"/> Add
		Winter Park, FL 32797	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Evan Rupley	7517 Hidden Hollow Dr	<input checked="" type="checkbox"/> Add
		Orlando, FL 32822	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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TALLAHASSEE

FILED
2007 NOV 18 10 25 AM
FALL RIVER, MA
Pursuant to 605 0207 (),
this document will not be listed as th

Dated Nov 2, 2017

Ricardo Sabales
Typed or printed name of signee