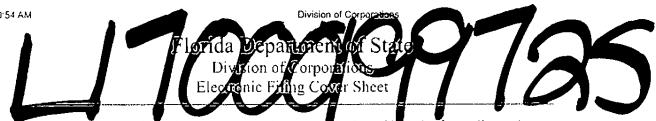
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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (614)573-3996

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Enter	the	email	address	for	this	business	entity	to	be	used	for	future	
						only one							

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN HARD ROCK SACRAMENTO FM LENDER, LLC

Certificate of Status	0
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Hap LEMEUX

To: Page: 3 of 5 2024-11-08 09:55:53 CST 12122023573 From: David Thomas

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Contrant (A Florida Limited Liab	as it now appears on our records.) bility Company)
The Articles of Organization for this Limited Liability Company we	ere filed on 09/26/2017 and assigned
Florida document number 1.17000199725	-
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabilit	ty company here:
Hard Rock GTN Lender, 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)	
	. *-: 11
	<u> </u>
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
_	7
B. If amending the registered agent and/or registered office add	dress on our records, <u>enter the name of the new regist</u>
agent and/or the new registered office address here:	
NI CNI TO COLLABORA	
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida Zip Cude
New Registered Agent's Signature, if changing Registered Agent:	City Zip Cute

occept 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 hability

company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

, Page: 4 of 5 2024-11-08 09:55:53 CST 12122023573 From: David Thomas

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

To:

<u>Title</u>	Name	Address	Type of Action
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			☐ ☐ Change
			□∧dd
			□Remove
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	date, if other than th	e date of filing	cannot be prior to	o date of filing or mo.	re than 90 days afte	ional) er filing) Pursuant to	605.0207
lan ellectiv <u>Vote:</u> Triti	ve date is listed, the date mu he date inserted in this b 's effective date on the I	olock does not m	ieet the applicat	ole statutory filing	requirements, tr	us date will not be	listed as
sin effective Sole: If the following special s	we date is listed, the date mu he date inserted in this b	plock does not m Department of St	eet the applicab tate's records.	ole statutory filing		us date will not be	
an effective Note: If the locument of the locu	ve date is listed, the date much be date inserted in this bis selfective date on the I	plock does not m Department of St ve date, but not	eet the applicat tate's records. an effective tim	ole statutory filing ie, at 12:01 a.m. or		us date will not be	
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