## L18000016683

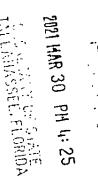
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## **COVER LETTER**

TO:

Registration Section

Div	ision of Cor	porations					
CUD IDOT.	CAT CODE GAMES, LLC						
SUBJECT:		Name of Lim	nited Liability Company				
~· 1			to the way				
The enclosed	1 Articles of	Amendment and fee(s) are sub	imitted for filing.				
Please return	all correspo	indence concerning this matter	to the following:				
		Nathaniel Weatherford					
			Name of Person	· · · · · · · · · · · · · · · · · · ·			
		Cat Coe Games LLC					
			Firm/Company				
		12212 Picket Fence Ct.					
			Address	·			
		Orlando, Florida. 32828.		Address  State and Zip Code  d for future annual report notification)  321 695-2133 at (			
			City/State and Zip Code				
		nathaniel.weatherford@gm					
		E-mail address: (	to be used for future annual report no	tification)			
For further in	nformation c	oncerning this matter, please c	all:				
Nathaniel W	eatherford						
	Name o	f Person	Area Code Daytii	me Telephone Number			
Enclosed is a	check for th	ne following amount:					
≅ \$25.00 F	Filing Fec	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy			
	iling Addres gistration S			ection			
Division of Corporations		•					
	). Box 632 Iahassee, F			Tallahassee oe Street, Suite 810			

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CAT CODE GAMES, LLC		
(Name of the Limited Liabi (A Florid	lity Company as it now appears on our records da Limited Liability Company)	<u>)</u>
The Articles of Organization for this Limited Liability Florida document number L18000016693	Company were filed on 1/18/2018	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
HITBOX INTERACTIVE LLC		75: 20:
The new name must be distinguishable and contain the words "Li	mited Liability Company," the designation "LLC"	or the abbreviation "L-L.C."
Enter new principal offices address, if applicable:		- 55 <u>G</u>
Principal office address MUST BE A STREET ADD	PRESS)	San A
Enter new mailing address, if applicable:		A: 25
Mailing address MAY BE A POST OFFICE BOX)	<u> </u>	·
3. If amending the registered agent and/or registere agent and/or the new registered office address here:		the name of the new regis
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	***	
<del></del>		rida 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 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>	Address	Type of Action
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			□Remove
			Change
			□Remove
			Z Z Z Add
			ZIZT Add AR 36 Remove
			ZIPTUMAR 38 PH LChange Change
			RIDA □Add
			Remove
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ffective date, if other than the date of filing an effective date is listed, the date must be specific and	:		(option	ıal)	
an effective date is listed, the date must be specific and lote: If the date inserted in this block does not m	cannot be prior to	date of filing or more le statutory filing r	than 90 days after fi	ling.) Pursi	uant to 605.020 not be listed a
ocument's effective date on the Department of St	ate's records.	, • , , , , , , , , , , , , , , , , , ,	1		
record specifies a delayed effective date, but not a lis filed.	an effective time	e, at 12:01 a.m. on	the earlier of: (b)	The 90tl	n day after the
March 25	2021				
Dated;	· · · · · · · · · · · · · · · · · · ·	.•			
Marin Marin	200	zed representative of			

Filing Fee: \$25.00