Ta: 8506176383

5/3/2018

# Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ROTHMAN & TOBIN, P.A.

Account Number : I20000000031

Phone : (305)895-3225 Fax Number : (305)895-7175

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# LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LUCKY 8 HOLDINGS, LLC

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MAY 0 4 2018

To: 8506176383

From: Michelle Valenza.co

### 5-03-18 4:23pm p. 3 of 5

# COVER LETTER

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30632	CI	Name of Lin	mited Liability Company
The enc	losed Articles o	f Amendment and fee(s) are su	bunitted for filing
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		on and the control of	To the tenouning.
		Michael S. Tobin	
		<del></del>	Name of Ferson
		Tobin & Associates, P.A.	
			Firm/Company
		11900 Biscayne Blvd., Su	ite 740
			Address
		Miami, FL 33181	6,64.
		han the same that the same tha	City/State and Zip Code
		mtobin@tobinlawyers.com E-mail address:	(to be used for future annual report notification)
For furth	er information d	oncerning this matter, please c	· · · · · · · · · · · · · · · · · · ·
Michael	S. Tobin		305 895-3225
	Name o	f Person	at ()  Area Code Daytime Telephone Number
Enclosed	is a check for t	ne following amount:	
\$25.0	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certified ⊖opy (additional copy is enclosed)  □ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)
	Registr Divisio P.O. Bo	ING ADDRESS: ation Section on of Corporations ox 6327 assee, FL 32314	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Exercitive Center Circle Tallahassee, FL 32301

From: Michelle Valenzano

## ARTICLES OF AMENDMENT TO ARTICLÉS OF ORGANIZATION

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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 Regist and Agent, Signature of New Registered Agent

From: Michelle Valenzauo

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

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To: 8506176383

From: Michelle Valenzano

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