## 118000107853

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		

Office Use Only



300317568663

08/27/18-+01027-+006 \*+25.00



K. SALY AUG 3 1 2018

## **COVER LETTER**

	ion Section of Corporations				
	INSTEM GAMES LLC				
SUBJECT: Name of Limited Liability Company					
The enclosed Artic	les of Amendment and fee(s) are submitted for filing.				
Please return all co	rrespondence concerning this matter to the following:				
	PAUL L. SMITH				
	Name of Person				
BRAINSTEM GAMES LLC					
Firm/Company					
514 LIMETREE DRIVE					
Address					
	OLDSMAR, FL 34677				
	City/State and Zip Code				
	paul.smith@brainstemgames.net  E-mail address: (to be used for future annual report notification)				
For further inform:	ntion concerning this matter, please call:				
Paul L. Smith					
1	at ()  Area Code Daytime Telephone Number				
Enclosed is a check	c for the following amount:				
■ \$25.00 Filing F	Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy 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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

18 AUG 27 AH 1: 40

SECRETARY OF STATE

TALLAHASSEE FLORIDA

BRAINSTEM GAMES 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 w	ere filed on 04/30/2018	and assigned
Florida document number 1.18000107853		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability	ty 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:		
(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 here:  Name of New Registered Agent:	ce address on our rec	ords, enter the name of the nev
New Registered Office Address:	_	
	Enter Florida street a	ldress
		, Florida
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as pr being filed to merely reflect a change in the registered office a company has been notified in writing of this change.	erformance of my dutie ovided for in Chapter 6	s, and I am familiar with and 05, F.S. Or, if this document is

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>	Type of Action
AMBR	Christopher S. Breckenridge	70 Eddies Cove	
		Henning, TN, 38041	Remove
			Change
AMBR	Alec J. Beddy	13107 Memorial Highway	<b>■</b> Add
		Building 39	
		Tampa, FL, 33635	Charge.
AMBR	Nikolaos Stathakis	88 Minerva Avenue	
		Scarborough, Ontario	□ Remove
		Canada, M1M-1V5	Change
			Add
			SERVE FIL
			mo Add D
			ORD Remove
			□ Change
			Add
			☐ Remove
			Change

	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.) FILED  SEC
	18 AUG 27 1
	ALLASTATION IS 40
	TALLAILASSEE, FLORE
•	
-	
-	<del></del>
•	
-	
_	
L'Woot	ive date, if other than the date of filing: (optional)
(If an eff Note:	ive date, if other than the date of filing:
the red	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	8/23/2018 Parl 1 Dogs
	Signature of a member or authorized representative of a member
	PAUL L. SMITH

Page 3 of 3

Filing Fee: \$25.00