

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phon	e #)
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Certified Copies	Certificate	s of Status
Our sight of the second	Eller Office	
Special Instructions to	Filing Officer:	
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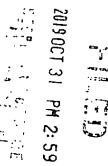


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## **COVER LETTER**

PAT PAT SUBJECT:	PONG ENTERTAINMENT, LLC		
	Name of Limite	ed Liability Company	
The enclosed Articles of	of Amendment and fee(s) are subm	itted for filing.	
Please return all corres	pondence concerning this matter to	the following:	
	Deborah Love		
		Name of Person	<del></del> _
	Friedman, Rosenwasser & G	foldbaum, P.A.	
	7280 W. Pałmetto Park Road	Firm/Company 1, Suite 202	
		Address	
	Boca Raton, FL 33433		
	dlove@frglaw.com	City/State and Zip Code	
	E-mail address: (to	be used for future annual report notif	ication)
For further information	concerning this matter, please call	l:	
Deborah Love		561 404-8755	
Name	of Person	at () Area Code 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

TO:

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

(Name of the Limited Liability Com (A Florida Limited	pany as it now appears on our record Liability Company)	<u>'ds.</u> )
The Articles of Organization for this Limited Liability Companional Review of Organization for this Limited Liability Companional Review of Companional Re		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
POOLSIDE VEGAS, LLC		
The new name must be distinguishable and contain the words "Limited Lial	bility Company," the designation "LL	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		201
Principal office address MUST BE A STREET ADDRESS)		-
		— — — — — — — — — — — — — — — — — — —
		, — ;
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
		m <b>9</b>
3. If amending the registered agent and/or registered egistered agent and/or the new registered office address he		ds, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addre	288
	<del></del>	lorida
	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>	Type of Action
MGR	John Kunkel	7350 Biscayne Blvd., Miami, FL 33138	<b>=</b> Add
			Remove
		<del></del>	Change
<del></del>			
			Remove
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ective date, if other than the	date of filing:			(0	ptional)	
effective date is listed, the date mue: If the date inserted in this b	st be specific and c lock does not me	annot be prior to eet the applical	date of filing or notes talent	iore than 90 days g requirements	after filing.) Purs , this date will r	uant to 605.020 ot be listed a
ument's effective date on the I	epartment of Sta	ite's records.				
ropord specifics a delaye	d offortivo do			simon ab 10.0	\	:
record specifies a delaye he 90th day after the rec	ord is filed.	ite, but not	an enective	.ime, at 12:1	on ti	ne earlier (
October 29 ed	·	2019	<u>.</u> •			
	<b>1</b>	0		<b>.</b>		
		$\gamma + \mathcal{V}_{\mathcal{I}_{2}}$		/		
-	Signature of a mo	ember or author	zed representative	of a member		•

Page 3 of 3

Filing Fee: \$25.00