118000254914

(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:
Special instructions to Filling Officer.

Office Use Only



000327835080

000327835080 04/12/19-01027--011 #425.00

	2615	
:		
;	~) 1
;	>	ITI C
33.	$\dot{\omega}$	<u></u>
,	(~)	

COVER LETTER

TO:

Registration Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

Red Lion Sports Bar, LLC SUBJECT: Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Rufino Paulino Name of Person Red Lion Sports Bar, LLC Firm/Company 18000 NW 68TH AVENUE, Apt. 206 Address Hialeah, FL 33015 City/State and Zip Code sr_rufino@hotmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Rufino Paulino 786 520-1212 Name of Person Daytime Telephone Number Enclosed is a check for the following amount: ■ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & □ \$60.00 Filing Fee. Certificate of Status Certificate of Status & Certified Copy Certified Copy (additional copy is enclosed) (additional copy is enclosed) MAILING ADDRESS: STREET/COURIER ADDRESS: Registration Section Registration Section Division of Corporations

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Red Lion Sports Bar, LLC	
(<u>Name of the Limited Liability Co</u> (A Florida Lim	ompany as it now appears on our records.) ited Liability Company)
The Articles of Organization for this Limited Liability Comp Florida document number <u>L18000254914</u> .	pany were filed on 10/30/2018 and assigned
This amendment is submitted to amend the following:	20 20 10
A. If amending name, enter the new name of the limited	liability company here:
The new name must be distinguishable and contain the words "Limited I	Liability Company," the designation "LLC" or the abbreviation "LLC."
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 registere registered agent and/or the new registered office address	d office address on our records, <u>enter the name of the here</u> :
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	Florida
	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

or removed from our records:

MGR = Manager AMBR = Authorized Member

Title	Name Julissa Paulino	Address 17341 NW 62nd Place	Type of Action
MGR		Miami, FL 33015	■ Add
			Remove
			Change
MGR	Mario R. Wynns	17341 NW 62nd Place Miami, FL 33015	■ Add
			Remove
			Change
			Remove
			□ Change
			Add
			□ Remove
			☐ Change
			Add
			Remove
			☐ Change
			Add
			☐ Remove
			☐ Change

	_	-				_
	-					-
			-	<u> </u>	<u>-</u>	-
						_
-						-
						_
						_
						_
				Ę:	53	
				;	- 23 13	- - r.
					<u> </u>	_ ' .
			<u> </u>	0. · 0. ·		<u>:</u> :::1
. <u> </u>			<u> </u>	771	∞	
				<u> </u>	. 17 . <u> </u>	_
						_
						_
						_
Tective date, if other than than effective date is listed, the date m	ne date of filing:		1 00	(optional)	b (4	
ote: If the date inserted in this	block does not meet the	applicable statute	ory filing requirem	days after filing.) ients, this date v	vill not be lis	15.020 sted a:
ocument's effective date on the	Department of State's re	ecoras.				
e record specifies a delaye The 90th day after the re		ut not an effe	ctive time, at :	12:01 a.m. o	n the earl	ier o
April 10	2019) 				
7	1					
12						
	Signature of a member	or authorized repres	sentative of a member	er		

Page 3 of 3

Filing Fee: \$25.00