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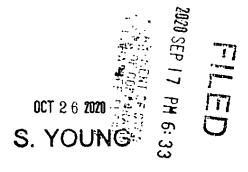
(Re	equestor's Name)	
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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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COVER LETTER

	ration Section n of Corporations
SUBJECT:	DEUCE GOLF, LLC .
	Name of Limited Liability Company
The enclosed Ar	ticles of Amendment and fee(s) are submitted for filing.
Please return all	correspondence concerning this matter to the following:
	Jamal Jackson
	Name of Person
	Jackson Corporate Law, P.C.
	Firm/Company
	190 S. La Salle St. Suite 430
	Address
	Chicago, Illinois 60603
	City/State and Zip Code
	JJackson@JacksonCorporateLaw.com
	E-mail address: (to be used for future annual report notification)
For further inform	nation concerning this matter, please call:
_Jamal Jac	Name of Person Name of Person Area Code Davigna Telephone Number
	Name of Person Area Code Daytime Telephone Number
Enclosed is a che	ck for the following amount:
№ \$25.00 Filing	Fee S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee. Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
Registr Divisio P.O. Bo	Address: ation Section n of Corporations ox 6327 ssee, FL 32314 Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

(Name of the Limited Liability Co.	GOLF, LLC
(A Florida Limite	ipany as it now appears on our records.)
The Articles of Organization for this Limited Liability Compar	
Florida document number 1.20000003682	and assigned
This amendment is submitted to amend the following:	ن برور برور المراجع ا من المراجع الم
A. If amending name, enter the new name of the limited lia	bility company here:
The new name must be distinguishable and contain the words "Limited Liab	pility Company," the designation "I I C" or thunkly
enter new principal offices address, if applicable:	13750 W COUNTAL PRIVE
(Principal office address MUST BE A STREET ADDRESS)	STE 350/411
	13750 W COUNTAL PRIVE STE 350 / 411 WINTER GARDEN, IL 34787
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	SAME AS ASIVE
B. If amonding the	
agent and/or the new registered office address here:	address on our records, enter the name of the new registered
Name of New Registered Agent:	TAREK DELAVALIADE
New Registered Office Address: 13750	W. COLONIAL DR. 350/411
	Enter Florida street uddress
WATOR	Ciny Florida 34787 Zip Code
N	City Zin 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

Title	<u>Name</u>	Address	Type of Action
AMBR	Linda DeLavallade	13790 Bridgewater Crossings Blvd. #1080 Windermere, FL 34786	□Add
			⊠Remove
		Dan no.	OChange
MGR	Tarek DcLavallade	13790 Bridgewater Crossings Blvd. #1080 Windermere, FL 34786	\(\sigma \) \(\sigma \) Adid
			□Remove
		2271 D	Change
MGR	TRG Capital Investments LLC	3361 Rouse Rd. STE 140 Orlando, FL 32817	\(\overline{\cdot 2} \) Add
			_ DRemove
			_ DChange
			_ 🗆 Add
			_ ©Remove
			_ □Change
			□Add
			Remove
			□ Change
			⊡Add
			□Remove
			□ Change

	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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ffective an effect	date, if other than the date of filing: (optional) the date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3) It's effective date on the specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3) It's effective date on the specific and cannot be prior to date of filing requirements, this date will not be first.
ote: If	the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the effective date on the Department of State's records.
осител	's effective date on the Department of State's records.
ecord s	pecifies a delayed effective date, but not an effective time, at 12;01 a.m. on the earlier of: (b) The 90th day after the
·s mcu,	the will day after the
ited	
	July 21 2020
ucu	
	and Mr. Travella de
<u>.</u>	Signature of a member of authorized review to
	Signature of a member of authorized representative of a member

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Filing Fee: \$25.00