

121 000 325320

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

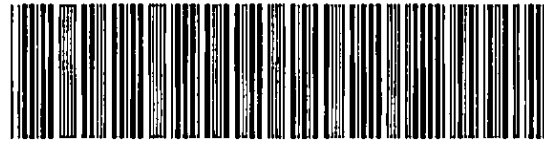
(Business Entity Name)

(Document Number)

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2021 NOV -8 PM 1:48  
CLERK

A. BUTLER

NOV 16 2021

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** TOP-TEN GAMES, LLC

\_\_\_\_\_  
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:

Gaila O. Perran

\_\_\_\_\_  
Name of Person

Top-Ten Games, LLC

\_\_\_\_\_  
Firm/Company

24500 Airport Road, Suite 1257

\_\_\_\_\_  
Address

Punta Gorda, FL 33950

\_\_\_\_\_  
City/State and Zip Code

toptengamesllc@gmail.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gaila O. Perran

941 763-4756  
at ( )

\_\_\_\_\_  
Name of Person

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  
P.O. Box 6327  
Tallahassee, 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**

2021 NOV -8 PM 1:48

TOP-TEN GAMES, LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

FL STATE

The Articles of Organization for this Limited Liability Company were filed on July 22, 2021 and assigned  
Florida document number L21000325320.

This amendment is submitted to amend the following:

**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 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)**

130 E. Marion Ave.

Suite 510188

Punta Gorda, FL 33951

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

Angela  
~~Angela~~ Machuca Dark

New Registered Office Address:

2827 Riverside Drive

*Enter Florida street address*

Punta Gorda

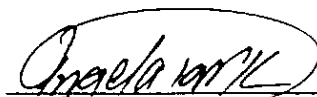
Florida 33950

*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>	<u>Type of Action</u>
AMBR	Toni Arthur	26449 Feathersound Dr.	<input type="checkbox"/> Add
		Punta Gorda, FL 33955	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Gaila O. Perran	24500 Airport Rd., Ste. 1257	<input checked="" type="checkbox"/> Add
		Punta Gorda, FL 33950	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MBR	Gaila O. Perran	24500 Airport Rd., Ste. 1257	<input type="checkbox"/> Add
		Punta Gorda, FL 33950	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MBR	Angelica Machuca Dark	2827 Riverside Drive	<input checked="" type="checkbox"/> Add
		Punta Gorda, FL 33950	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

(If an effective 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)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Gaila O. Perron  
Signature of a member of

Typed or printed name of signee