L21000404056

(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.
J. HORNE
JUL 1 1 2022

Office Use Only



300376705583

07/06/22--01031--001 **25.00

2022 JUL -8 PM 2:31

RECTIVED

FILED
2022 JUL -8 AM 10: 59

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 ••• 1-800-342-8062 • Fax (850) 222-1222

Game RPM Her	nando LLC	
	· 	
		Art of Inc. File
		LTD Partnership File
		Foreign Corp. File
		L.C. File
		Fictitious Name File
		Trade/Service Mark
		Merger File
		Art, of Amend, File
		RA Resignation
		Dissolution / Withdrawal
		Annual Report / Reinstatement
		Cert. Copy
		Photo Copy
		Certificate of Good Standing
		Certificate of Status
		Certificate of Fictitious Name
		Corp Record Search
		Officer Search
		Fictitious Search
Signature		Fictitious Owner Search
5.g		Vehicle Search
		Driving Record
Requested by:		UCC 1 or 3 File
Name	Date Time	UCC 11 Search
Name	Date Time	UCC Retrieval
Walk-In	Will Pick Up	Courier
TOTAL PROPERTY OF A LOCAL STATE		•

۲.

COVER LETTER

TO: Registration Section

Tallahassee, FL 32314

Division of Co	orporations		
	M Hernando, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
	of Amendment and fee(s) are sub		
	David A Svec - Authorize	d Consultant	
		Name of Person	
	Main Street Holdings LLC		
		Firm/Company	
	3941 Tamiami TRL Unit 3	3157 #76	
	 	Address	
	Punta Gorda		
		City/State and Zip Code	
	dave@mainstreetholdings.r	et to be used for future annual report noti	fication
For further information	concerning this matter, please c		
David A Svec - Author	rized Consultant	323 3636455 at ()	
Name	of Person	Area Code Daytim	e Telephone Number
Enclosed is a check for	the following amount:		
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Malling Addr		<u>Street Address:</u> Registration Se	ction
Registration Division of	Corporations	Division of Cor	porations
P.O. Box 63		The Centre of T	Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AR		AMENDME:	NT	
A 1311		「() ()()()	-1C\NI	RECORDANGES
AR		ORGANIZAT Je	ION	~ (127 ₁₁)
	ν.	<i>,</i> ,		ACCAN.
GAME RPM HERNANDO LI	LC			
SamedalicLim	ited Lewis Come	Labring Company	THE PAL LEZOCORY	
The Articles of Organization for this Litalied (Jability Company	y were flied on - ⁶⁹	N13/2021	ಕಾರ ಹಾಗ್ರಪ್ಪಾರ
Florida document number 1,21000404056				<u> </u>
This amendment is submitted to amend the fol	louiea:			
	•			
A. If smending name, enter the new pame	of the limited lial	bility company he	te;	
The new name must be distinguishable and contain the	ussele "Limited Link	ility Compeny " the 4s	nigration "III" or t	he abbreviation "L.L.C."
		Ocal LA	المراباء المراباء	TDAL
Enter new principal offices address, if appli		8091 1V	1 JITARY	18/4/1
(Principal office address MUST BE A STRE	<u>ET ADDRESS)</u>	1/N/13 0	70 m 200	AU 61 334110
		-MCDI	CAN DIA	Ch 12 - 12110
Enter new mailing address, if applicable:		8091 N	Military	TRAIL.
(Mailing address MAY BE A POST OFFICE	: ROX)	11/17/5 8	749	
Internal date of the second of	2014	WEST PA	Vim BEAC	21, FL 33410
				7
B. If amending the registered agent and/or		address on our re	cords, <u>enter the r</u>	name of the new registered
agent and/or the new registered office address	ess nere:			
Name of New Registered Agent:	K.B. Mathis, P	P.A		
New Registered Office Address:	3577 CARDIN	IAL POINT DILIVE		·
New Vehizieten Ollice Vooless:		Enter Flori	da sireei address	
	Jacksonville		Florida	32257
	_	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 chappe.

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:

or removed from our records:	
MGR = Manager	
AMBR = Authorized Member	

<u>Title</u>	Name	Address	Type of Action
			Remove
		·	© Change
			□ Add
			CIRemove
			□ Change
			□Add
			□Remove
			Change
_ 			
			Remove
			Change
			□Add
			Change
			□ Add
			Change

	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
-	
-	
_	
-	
_	
_	
_	
_	
-	
-	
_	
_	
_	
-	
-	
_	
_	
an eff lote:	ve date, if other than the date of filling: cetive 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 605.020 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a ent's effective date on the Department of State's records.
is fil	
ated_	Janil & Swe Signature of a member or authorized representative of a member
	David & Suc
	Signature of a member or authorized representative of a member
	David A Svec

Filing Fee: \$25.00