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Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: PLANET HOLLYWOOD INTERNATIONAL, INC.

Account Number : 120080000100

: (407)903-5513 : (407)352-7310 Fax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN:

VIRTUAL DINING (NEW YORK), LLC

Certificate of Status	0
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T. LEMIEUX

JAN 19 2022

H220000198783

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

VIRTUAL DINING (NEW YORK), LLC			
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on our records.) Jability Company)		
The Articles of Organization for this Limited Liability Company Florida document number <u>L21000459323</u> .	were filed on 10/21/2021	an	d assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
VIRTUAL DINING (HOLLYWOOD). LLC			
The new name must be distinguishable and contain the words "Limited Liabil	ity Company." the designation "LLC" or	the abbroviati	on "L.L.C."
Enter new principal offices address, if applicable:	4700 Millenia Blvd., Ste 415		
(Principal office address MUST BE A STREET ADDRESS)	Orlando, FL 32839		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	4700 Millenia Blvd., Ste 415 Orlando, FL 32839		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, enter the	name of th	e new registered
		· · · · · · · · · · · · ·	m
Name of New Registered Agent:		<u></u>	
New Registered Office Address:	Enter Florida street address	72 45 12 45	
	, Florid		
	Ciry	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:

<u>Title</u>	Name	Address	Type of Action
			□Remove
			□Change
			□Add
			□Remove
			□Change
			DAdd
			□ Петюνє
			[]Change
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			□Remove
			□Change
			□Add
			□Remove
			□Change
	<del></del>		

\_\_ Change

Remove

. If amending any other inform	ation, enter change(s) here	: (Attach additional shee	ts, if necessary.)
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Effective date, if other than the (If an effective date is listed, the date me Note: If the date inserted in this hadocument's effective date on the I	slock does not meet the applica	to date of filing or more than 90 able statutory filing requiren	(optional) days after filing.) Pursuant to 605.0207 (2 nents, this date will not be listed as th
the record specifics a delayed effecti ord is filed.	ve date, but not an effective tir	ne, at 12:01 a.m. on the carl	ier of: (b) The 90th day after the
January 14	2022		
	1/1/1/	7	
	15 gnature of a member of autho	rized representative of a memb	21
Jeffrey Sirolly	V		
<del></del>	Typed or printe	d name of signee	