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| (Req | uestor's Name) | |
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| PICK-UP | ☐ WAIT | MAIL |
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| Certified Copies | Certificates | of Status |
| Special Instructions to F | iling Officer: | |
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SECHETARY OF SEA

COVER LETTER

| TO: Registration Secti Division of Corpo | | | | |
|---|--|---|---|--|
| SUBJECT: <u>Vacle</u> | Holly wood End Name of Limi | <u>fer tainment LLC</u> ited Liability Company | | |
| The enclosed Articles of An | nendment and fee(s) are sub | mitted for filing. | | |
| Please return all correspond | ence concerning this matter | to the following: | | |
| | M | ichelle Genti | re following: Selly Gentily Name of Person | |
| | | Name of Person | | |
| | | Firm/Company | | |
| | 1106_ | S Cooper I |)(· | |
| | Deltona | City/State and Zin Code | 5 | |
| | Chellie E-mail address: (i | 618 @ mail. Co | M. | |
| For further information con | cerning this matter, please ca | | | |
| Michelle Name of P | Gentile erson | at (<u>407</u>) _ 20 | 1-3297 Paytime Telephor | ne Number |
| Enclosed is a check for the | following amount: | | | |
| Amendment | ☐ \$30.00 Filing Fee & Certificate of Status | | | Certificate of Status & Certified Copy |
| | | | | |

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

FILED

| Uncle Hollywood Entert | ainment LLC | 2027 JUN -3 AM 10: 40 |
|--|---|-------------------------------------|
| Uncle Holly wood Entert (Name of the Limited Liability Comps (A Florida Limited) | iny as it now appears on our re Liability Company) | TALLAHASSEE. FL |
| The Articles of Organization for this Limited Liability Company | were filed on Dec. 29 | and assigned |
| Florida document number <u>L2200000 7296</u> . | | |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limited liab | ility company here: | |
| Uncle Hollywood La | _C | |
| The new name must be distinguishable and contain the words "Limited Liabi | lity 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) | | |
| | | |
| | | |
| B. If amending the registered agent and/or registered office | address on our records, <u>e</u> r | nter the name of the new registered |
| agent and/or the new registered office address here: | | |
| Name of Nam Designand Agents | | |
| Name of New Registered Agent: | | |
| New Registered Office Address: | Enter Florida street a | ddrose |
| | truer r tortaa street a | |
| | City | , Florida Zip Code |
| N. D. Var. 1 A. val. Simon if the main D. D. Var. | • | in come |
| New Registered Agent's Signature, if changing Registered Agent | <u>.</u> | |

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> | Name | Address | Type of Action |
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| ote: | ve date, if other the ective date is listed, the d If the date inserted in ent's effective date or | this block does | not meet the a | ipplicable statu | tiling or more that tory filing requ | (option 90 days after fairements, this | iling.) Pursuant to 6 date will not be li | 05.0207 (isted as t |
| record d is fil | d specifies a delayed ε ed. | effective date, bu | ut not an effec | tive time, at 12 | :01 a.m. on the | earlier of: (b) | The 90th day at | fter the |
| Dated . | May 29 | | 203 | 32. | | | | |
| | • | | . Ask | 1/// | | | | |