L22000083896

| (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: |
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| |
| |

Office Use Only



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05/22/24--01010--024 ++25.00



COVER LETTER

| TO: Registration Section Division of Corporations |
|---|
| SUBJECT: DOWNTOWN Delyay Enteranment 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: |
| GYESUY BIGALO Name of Person |
| DUNTOWN Delvay Entertainment LLC |
| 324 Cocunt Isle Drive |
| Tut (avarage Fr 37301 City/State and Zip Code |
| DE-mail address: (to be used for future annual report notification) |
| For further information concerning this matter, please call: |
| Sylfuy Blanco at 156 443 1750 Name of Person at 156 Daytime Telephone Number |
| Enclosed is a check for the following amount: |
| \$25.00 Filing Fee \$\times \text{S30.00 Filing Fee & Certificate of Status}\$\$ Certified Copy (additional copy is enclosed) \$\times \text{\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)}\$\$\$} |
| |

TO:

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

| (Name of the Limited Liability Company as it now appropriate (A Florida Limited Liability Company) | Dears on our records.) |
|--|--|
| The Articles of Organization for this Limited Liability Company were filed on Florida document number <u>L22000083896</u> . | 2/2//22 and assigned |
| This amendment is submitted to amend the following: | |
| A. If amending name, enter the new name of the limited liability company | y here: |
| The new name must be distinguishable and contain the words "Limited Liability Company," the new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) | he designation "L.C." or the abbreviation "L.L.C." |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | avalogale, FC 3334 |
| B. If amending the registered agent and/or registered office address on ou agent and/or the new registered office address here: | ir records, enter the name of the new registered |
| Name of New Registered Agent: Sterry Blanco New Registered Office Address: 324 (VCM+) Enter | Se DYLL Florida street address |
| Fort Chulydal | , Florida 3390 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.

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| (If an effect Note: If | e date, if other than the date of filing: |
| ne record : ord is filed | 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 d. |
| Dated _ | May 17 . 2021. |
| | |
| - | Signature of a member or authorized representative of a member |