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COVER LETTER

TO: Registration Section

Division of Corporations

	TOP FOUN C	AMINIC 11C	
SUBJECT:	Name of Limi	AMING LLC ited Liability Company	
		,,	
The enclosed Articles of Ar	mendment and fee(s) are sub-	mitted for filing.	
Please return all correspond	dence concerning this matter t	to the following:	
	Randol	ph J. Packaro	<u>/</u>
		Name of Person	
	TOP FO	N GAMING 22 Firm/Company	<u>C</u>
	959 Park	Lwood oly.	
		Address	<u> </u>
	Ormand	Reach, FL 32 City/State and Zip Code	174
	B-mail address: (1	2 @ A o I . C o M to be used for future annual report notif	ication)
For further information cor	cerning this matter, please ca	all:	
Randelph J.	Pockard Person	at (516) 662-	5514 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)
<u>Mailing Address:</u> Registration Se	ection	<u>Street Address:</u> Registration Sec	etion
Division of Co	rporations	Division of Con	
P.O. Box 6327 Tallahassee, FI	32314	The Centre of T	allahassee Street, Suite 810
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Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TOP FON GAMING ILC

(Name of the Limited Liability Comp. (A Florida Limited	any as it now appears on or Liability Company)	ur records.)
The Articles of Organization for this Limited Liability Company Florida document number $\frac{22000334449}{}$.	y were filed on <u>07</u>	128/2022 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lial	bility company here:	
Whtshubyz LLC The new name must be distinguishable and contain the words "Limited Liab		
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designat	ion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	NA	
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	FILED 2023 FEB - 2 AM 8 SECTION AND SEE
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our record	77 0
Name of New Registered Agent:	/A	
New Registered Office Address:		eet address
_1,		, Florida
	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 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
			🗆 Add
			□Remove
			□Change
			□ Add
			□Remove
			□Change
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ffective date, if other than the date of filing:	5.020
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed ocument's effective date on the Department of State's records.	
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 is filed.	er the
pated January 28th, 2023.	
Pated January 28th, 2023. Multiple J. Valley Signature of a member or authorized representative of a member	
Randalph J. Packard Typed or printed name of signee	

DU: D 005.00