## L23000047447

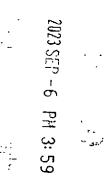
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## **COVER LETTER**

то:	Registration Sectorial Division of Corp.				
CUDI	CHESS GAN	MES LLC			
SORTE	CCT:	Name of Lim	ted Liability Company		
		mendment and fee(s) are sub-			
		FRANCHESCA LOZANO			
			Name of Person		<del> </del>
		CHESS GAMES			
			Firm/Company		
		830 LAKEVIEW DR			
			Address		<del></del>
		MIAMI BEACH, FL 3314	0		
		Franchescalozano@aol.com	City/State and Zip Code	•	
			to be used for future annual	report notification)	<u></u>
For fur	ther information co	ncerning this matter, please co	all:		
FRAN	CHESCA LOZANO	)	786 288	8-6163	
-	Name of	Person	Area Code	Daytime Telepho	one Number
Enclos	ed is a check for the	following amount:			
□ \$2	5.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enc		\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address:	<u>:</u>	Street Ac	ddress:	

Registration Section
Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

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



CHESS GAMES LLC

2023 SEP -6 PH 3: 59

(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Compan	y were filed on 01/25/2023	and assigned
Florida document number L23000047447		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
CHESS GAMES, LLC		
The new name must be distinguishable and contain the words "Limited Liab	oility Company," the designation "LLC" or the	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:	N/A	
(Mailing address MAY BE A POST OFFICE BOX)	<del></del>	<del></del>
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the n</u>	ame of the new regist
Name of New Registered Agent: N/A	<u> </u>	
New Registered Office Address:		
	Enter Florida street address	
	, 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>	<u>Name</u>	Address	Type of Action
MGR	EDGAR LOZANO	830 LAKEVIEW DR, MIAMI BEACH FL 33140	<b>=</b> Add
			□Remove
			□ Change
			□Add
			□Remove
			Change
			□Add
			□ Remove
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f an eff Note:	ive date, if other than the date of filing:  (optional)  ective 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 at ent's effective date on the Department of State's records.
recor d is fi	d 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 led.
Dated	08/14/23
	Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member  Franches Ca Lozano, MGR