## L23000112369

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## **COVER LETTER**

	egistration Se ivision of Cor					
SUBJECT		sement, LLC				
NOBJECT	•	Name of Lin	nted Liability Company			
		Amendment and fee(s) are sub	_			
Please retu	rn all correspo	indence concerning this matter	to the following:			
		Kelly B. Mathis, Esquire				
			Name of Person			
		K.B. Mathis, P.A.				
			Firm/Company			
		3577 Cardinal Point Drive				
			Address	<del></del>		
		Jacksonville, FL 32257				
		kmathis@mathislaw.net	City/State and Zip Code		2023	
		E-mail address: (	to be used for future annual report notification)			4
For further	information co	oncerning this matter, please c	all:		27	, 48751 L. 11
Kelly B. M	athis, Esquire		904 549-5755 at ()			; † ; ; † ;
	Name of	Person	at () Area Code Daytime Telephe	one Number	2023 HAR 27 PH 12: 34	الوسية ا
Enclosed is	a check for th	e following amount:				
<b>≡</b> \$25.00	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ Certified Copy (additional copy is enclosed)	Certified C	of Status &	

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

RKW Amusement, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on March 3, 2023 and assigned Florida document number L23000112369 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name most be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address , Florida

## 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.

Circ

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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

Title	Name	<u>Address</u>	Type of Action
AMBR	Kathy Womack	P.O. Box 273	<b>=</b> Add
		San Mateo, FL 32187	□Remove
			□Change
			CAdd
			□Remove
		<del></del>	70Change
			PRemote 17 12: 34 Change
			□Add
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			🖾 Change
	<del></del>		□ Add
			□Remove
			□ Change

·		PIII2:
	ghapre of a member or authorized representative	
med March 23	2023	2023 MAR 2
record specifies a delayed effective of is filed.	date, but not an effective time, at 12:01 a.m.	
Tective date, if other than the d in effective date is listed, the date must b ote: If the date inserted in this bloc ocument's effective date on the Dep	ate of filing:	(optional) more than 90 days after filing.) Pursuant to 605.0 ng requirements, this date will not be listed
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