## 123000125849

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(2.7, 2.2.2.2.7)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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## **COVER LETTER**

s of Amendment and fee(s) are suespondence concerning this matter.  TIMOTHY HARRIS  1039 DR MARTIN LUT		
TIMOTHY HARRIS  1039 DR MARTIN LUT	Name of Person  Firm/Company THER KING JR STREET SO	
TIMOTHY HARRIS	Name of Person  Firm/Company THER KING JR STREET SO	
1039 DR MARTIN LUT	Firm/Company THER KING JR STREET SO	
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	Address	
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ST. PETERSBURG, FLO	ORIDA 33705	
SEVENTWOSEVEN4949	_	<del> </del>
E-mail address: on concerning this matter, please	: (to be used for future annual report noti call:	fication)
5	727 900-4433	
me of Person	Area Code Daytim	e Telephone Number
or the following amount:		
e S30.00 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
		at () mc of Person Area Code Daytim  For the following amount:  The Sign Sign Sign Sign Sign Sign Sign Sign

Mailing Address:

TO:

**Registration Section** 

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

SEVEN TWO SEVEN ARCADES, LLC			
( <u>Name of the Limited Liability Compa</u> (A Florida Limited	any as it now appears on our records.) Liability Company)		
he Articles of Organization for this Limited Liability Company	were filed on $\frac{03/10/2023}{}$ and assigned		
lorida document number L23000125849			
his amendment is submitted to amend the following:			
. If amending name, enter the new name of the limited liab	pility company here:		
EVEN TWO SEVEN GAMEROOM & EVENT HALL, LLC			
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."		
nter new principal offices address, if applicable:	1039 DR MARTIN LUTHER KING JR STREET SO		
Principal office address MUST BE A STREET ADDRESS)	ST. PETERSBURG, FLORIDA 33705		
nter new mailing address, if applicable:	1039 DR MARTIN LUTHER KING JR STREET SO		
Mailing address MAY BE A POST OFFICE BOX)	ST. PETERSBURG, FLORIDA 33705		
. If amending the registered agent and/or registered office gent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:	address on our records, enter the name of the new regist		
	Florida Florida		
	City Zip Code		
ew Registered Agent's Signature, if changing Registered Agent:	27		

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>	<u>Address</u>	Type of Action
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			□Remove
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Effective date, if other than the	date of filing:	(optional)	
	be specific and cannot be prior to date of filing out does not meet the applicable statutory i		
document's effective date on the D	partment of State's records.		
e record specifies a delayed effectiv rd is filed.	edate, but not an effective time, at 12:01 a.	m, on the earlier of: (b) The 9	Hoth day after the
Dated	2023		
Dated	<del></del>		
Tim	the House		
	Signature of a member or authorized representa	tive of a member	<del></del>

THE PARTOR

Typed or printed name of signee