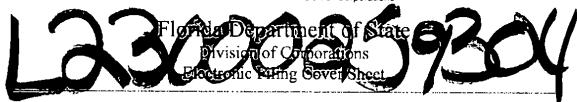
6/28/23, 7:10 AM

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000228981 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 Phone : (323)962-8600 Fax Number : (323)389-0502

Enter the email address for this business entity to be used for future

annual report mailings. Enter only one email address please. ** $_{\sim}$. Email Address:____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN GAMES CENTRAL TL LLC

> Certificate of Status Certified Copy 1 Page Count 07 Estimated Charge \$55.00

Electronic Filing Menu Corporate Filing Menu

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JUN 2 9 2023

Page: 3 of 6

COVER LETTER

	gistration Se vision of Cor			,
ara man	GAMES C	ENTRAL TI, LLC		•
SUBJECT:		Name of Limit	ted Liability Company	
The enclose	ed Articles of .	Amendment and fee(s) are subn	nitted for filing.	
Please retur	n all correspo	ndence concerning this matter t	o the following:	
		Cheyenne Moseley		
			Name of Person	
		Legalzoom.com, Inc.		
			Firm/Company	
		101 N Brand Blvd 11th Fl		
			Address	
		Glendale, CA 91203		
		Nulsa and da 000 and 1 and	City/State and Zip Code	
		lukasportela99@gmail.com	be used for future annual rep	ort notification)
For further i	information co	oncerning this matter, please cal		
Cheyenne A	Moseley		800 773-0	9888
	Name of	Person	at () Area Code	Daytime Telephone Number
Enclosed is	a check for th	e following amount:		
S25.00 l	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	■ \$55.00 Filing Fee & Certified Copy (additional copy is enclose	Certificate of Status Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Ft. 32314 STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 To:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GAMES CENTRAL TLALC		
(<u>Name of the Limited Liability Co</u> (A Florida Lim	ompany as it now appears on our records.) inted Liability Company)	
The Articles of Organization for this Limited Liability Complorida document number 1.23000259304	pany were filed on 05/26/2023	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
Games XPCR LLC		
he new name must be distinguishable and contain the words "Limited I	Liability Company," the designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
		
<u>Principal office address MUST BE A STREET ADDRESS</u>	<u> </u>	
Enter new mailing address, if applicable:		·
Mailing address MAY BE A POST OFFICE BOX)		202
		نب
		-
3. If amending the registered agent and/or registere	d office address on our records, ent	r⇒ er the name³of the
egistered agent and/or the new registered office address		-
		• 24
Name of New Registered Agent:		•
rame of New Registered Agent.		. 26
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
**************************************	Cuy	Zıp 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 Changing Registered Agent, Signature of New Registered Agent

MGR = Manager

To:

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

AMBR = A	Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			
			☐ Remove
			☐ Change
			☐ Remove
			☐ Change
			
			☐ Remove
		-	
			
			□ Remove
			☐ Change
			Add
			☐ Remove
			Add
			Remove
			□ Chance

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