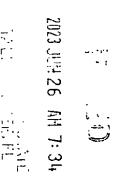
L23000 275254

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



06/26/23--01020--023 **25.00



Office Use Only

of 81912023

COVER LETTER

TO:	Registration Se Division of Cor		. U	
,	•			
SUBJI	ECT: 4Play Cigar	rs LLC		
		Name of Limi	ited Liability Company	
The en	closed Articles of	Amendment and fee(s) are subi	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		Damon Burgess		
			Name of Person	
		4Play Cigars LLC		
			Firm/Company	
		2012 Dumont Drive		
			Address	
		Valrico, FL 33596	0) (0) 12 (0) 1	
		damonburgess750@yahoo.c	City/State and Zip Code	
			to be used for future annual report notif	ication)
For fu	rther information c	oncerning this matter, please ca	alt:	
Damo	n Burgess		at (502) 314-8600	
	Name o	f Person	Area Code Daytime	: Telephone Number
Enclos	sed is a check for th	ne following amount:	•	
■ \$2	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)

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**



451 437 010 450 110

2023 JUN 26 MI 7: 21

4Play Cigars	4PLAT CIGARS LLC	- 11 1.34
(Name of the Lin	ited Liability Company as it now appears on our re (A Florida Limited Liability Company)	cords.)
	(14) fortual ratificación franchistry Company (ALL WEST
The Articles of Organization for this Limited	Liability Company were filed on 6/07/2023	and assigned
lorida document number L230000275254	·	
his amendment is submitted to amend the fo	llowing:	
A. If amending name, enter the new name	of the limited liability company here:	
he new name must be distinguishable and contain the	words "Limited Liability Company," the designation "	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appl	icable:	
Principal office address MUST BE A STRE	ET ADDRESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE	<u> </u>	
3. If amending the registered agent and/or	registered office address on our records, <u>er</u>	nter the name of the new regist
ngent and/or the new registered office addr	ress here:	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street aa	ldress
		, 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 Changing Registered Agent, Signature of New Registered Agent

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	Shonnese Reed	3439 Janeil Rd	□Add
		Louisville, KY 40216	■Remove
			□Change
			□ Add
			□Remove
		 	☐Change
			□Change
_			□ Add
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Effect	ve date, if other than the date of filing:(optional)
lt`an et	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 605.0207
	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ent's effective date on the Department of State's records.
e reco rd is f	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
ra is i	eu.
Dated	·
	Signature of a member authorized representative of a member

Filing Fee: \$25.00