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| (Requestor's Name) |
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| (City/State/Zip/Phone #) |
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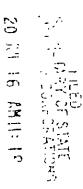


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COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATI | ON: | Room Association, I | nc. | | | |
|------------------------------|---|--|---------|--------------------|--|-------------|
| DOCUMENT NUMBER: | N20000003642 | | | | | |
| The enclosed Articles of Ar | | omitted for filing. | | | | |
| Please return all correspond | lence concerning this mat | ter to the following: | | | | |
| Kelly B. Mathis, Esquire | | | | | | |
| | | (Name of Contact P | erson) | | | |
| K.B. Mathis, P.A. | | | | | | |
| | | (Firm/ Compan | y) | | | |
| 3577 Cardinal Point Drive | | | | | | |
| | | (Address) | | | | |
| Jacksonville, FL 32257 | | | | | | |
| | 1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1- | (City/ State and Zip | Code) | | | |
| kmathis@mathislaw.net | | | | | | |
| 1 | E-mail address: (to be use | d for future annual re | port no | tification |) | |
| For further information con | cerning this matter, please | e call: | | | | |
| Kelly B.Mathis, Esquire | | al | 904 | | 549-5755 | 29 |
| | (Name of Contact Person | | | Code) | (Daytime Telephone Num | ber) |
| Enclosed is a check for the | following amount made p | ayable to the Florida | Depart | ment of | State: | |
| ■ \$35 Filing Fee | □\$43.75 Filing Fee & Certificate of Status | □\$43.75 Filing Fee Certified Copy (Additional copy enclosed) | | Certifi Certifi | Filing Fee cate of Status ed Copy is seed) | 12 1 |

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address
Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

| Lake County Game Room Association, Inc. | | | |
|--|--|-------------------------------------|------------------|
| Name of Corporation as currently filed with the I | Florida Dept. of State) | | |
| N20000003642 | | | |
| (Docume) | nt Number of Corporation (if | known) | |
| ursuant to the provisions of section 617.1006, Florid mendment(s) to its Articles of Incorporation: | la Statutes, this <i>Florida Not F</i> | for Profit Corporation adopts the f | òllowing |
| . If amending name, enter the new name of the c | corporation: | | |
| | | | The new |
| ame must be distinguishable and contain the word " Company" or "Co." may not be used in the name. | corporation" or "incorporate | | |
| Enter new principal office address, if applicable | | | |
| Principal office address <u>MUST BE A STREET AD</u> | DRESS) | | |
| | | | |
| | | | |
| Enter new mailing address, if applicable: | | | |
| (Mailing address <u>MAY BE A POST OFFICE BO</u> | <u> </u> | | |
| | | | |
| | | | |
| If amending the registered agent and/or registered new registered agent and/or the new registered | | , enter the name of the | |
| Name of New Registered Ayent: | · | | |
| _ | (1 | Florida street address) | |
| New Registered Office Address: | | | (B) |
| _ | | , Florida | _ <u>~</u> |
| | (City) | (Zip Code) | |
| ew Registered Agent's Signature, if changing Re | gistered Agent: | | יפרי |
| nereby accept the appointment as registered agent. | | t the obligations of the position. | 1:11KV 91 7FF 0Z |
| | | | |
| | Signature of New Regis | tered Agent, if changing | |

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

| Example: X Change X Remove X Add | | Doe Jones Smith | |
|---|--------------|---|--|
| Type of Action (Check One) | <u>Title</u> | Name | <u>Addres</u> s |
| 1) Change × Add | <u>T</u> | Tammy Berard | 4584 Ashton Road Sarasota, FL 34233 |
| Remove | | | |
| 2) Change Add | <u>S</u> | David Svec | 4584 Ashton Road Sarasota, FL 34233 |
| Remove 3) Remove Add Remove | | | |
| 4) Change Add | | | |
| Remove 5) Change Add | | | |
| Remove 6) Change Add | | | |
| Remove | | | |
| E. If amending or addin (attach additional sheet | | rticles, enter change(s) here: (Be specific) | |
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| The date of each amendment(s) a date this document was signed. | doption: | - | | , if other than the |
| Effective date if applicable: | | | | |
| mappineaure. | (no more than 90 day | rs after amendment file | e date) | |
| Note: If the date inserted in this blo document's effective date on the De | ock does not meet the applic epartment of State's records. | able statutory filing re | quirements, this date will | not be listed as the |
| Adoption of Amendment(s) | (CHECK ONE) | | | |

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

| Date | July <u>\$</u> , 2020 | |
|-------|-----------------------|--|
| Signa | nture | |
| | have not been selecte | ice chairman of the board, president or other officer-if directors ed, by an incorporator – if in the hands of a receiver, trustee, or |
| | other court appointed | d fiduciary by that fiduciary) |
| | Ali Chang | I fiduciary by that fiduciary) |
| | | |

(Title of person signing)