## 917000043743

(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:		





500377932425

12/15/21--01005--002 \*\*35.00



Y SULKER DEC 28 2021

## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: JACKPOT SKILL	S ARCADE INC		
	BER: P17000043743			
The enclosed Articles	s of Amendment and fee are su	bmitted for filing.		
Please return all corre	espondence concerning this ma	itter to the following:		
	MARIE B. CODE, ESQ.			
		Name of Contact Person	1	
	MARIE B. CODE, ESQ., P.L.			
		Firm/ Company		
	1308 SW 27TH TERRACE			
		Address		
	CAPE CORAL, FLORIDA 3	3914		
		City/ State and Zip Cod	e	
	MARIE@MARIEESQUIRE	.СОМ		
	•	sed for future annual report	notification)	
For further information	on concerning this matter, plea		829-0063	
Name of Contact Person			de & Daytime Telephone Number	
Enclosed is a check f	or the following amount made	payable to the Florida Dep	artment of State:	
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address			Address	
Amendment Section		Amendment Section		
Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee		
Tallahassee, FL 32314			N. Monroe Street, Suite 810	

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

JACKPOT SKILLS ARCADE INC

(Name	of Corporation as current	tly filed with the Florida De	pt. of State)	
P17000043743				
	(Document Number	of Corporation (if known)		-
Pursuant to the provisions of section 607 ts Articles of Incorporation:	,1006, Florida Statutes, this	Florida Profit Corporation	adopts the following ar	nendment(s)
A. If amending name, enter the new n	ame of the corporation:			
			Th	ie new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	Corp," "Inc," or "Co".	A professional corporation		
3. Enter new principal office address, Principal office address <u>MUST BE A S</u>				<del></del>
				<del>_</del>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		25 HOMESTEAD ROA	D. UNIT 29	
		LEHIGH ACRES, FLOR	IDA 3393€ ₹ 8	era an,
			SS.	Prices
). If amending the registered agent ar	rd/ar registered affice add	lease in Florida, antas tha n	S. I	( )
new registered agent and/or the ne	w registered office addres	<u>8:</u>	ante or the	<b>4.9</b>
Name of New Registered Agent	MIKEL KOLA		11; 55	
	4623 SW 1TH AVENUE			
	tFlorida st	reet address)	<del> </del>	
New Registered Office Address:	CAPE CORAL		. Florida 33914	
		(City)	(Zip Code	<del>!)</del>
in Danistan A American Stranger	tamadan Darim and Anna			
lew Registered Agent's Signature, if c hereby accept the appointment as regist			ons of the position.	
	Signature of New 1	Registered Agent, it changing	,	
	ragination of record	against en rigoint if cininging		
Check if applicable				

 $\square$  The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). F.S.

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	<u>PT</u> <u>Joh</u>	<u>n Doe</u>		
X Remove	<u>V</u> <u>Mil</u>	Mike Jones		
X Add	<u>SV</u> <u>Sal</u>	ly Smith		
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s	
1) Change	PVPS	TONUDEDAJ	4623 SW 17TH AVE.	
Add X Remove			CAPE CORAL. FL 33914	
2) Change	PVPS	MIKEL KOLA	4623 SW 17TH AVE.	
XAdd			CAPE CORAL, FL 33914	
Remove 3 ) Change				
Add				
Remove				
4) Change				
Add				
Remove				
51 Change	<del></del> -			
Add				
Remove				
6) Change				
Add			<del></del>	
Remove				

The date of each amendment(s) adoption:date this document was signed.	, if other than the
Effective date <u>if applicable</u> :	
	tno more than 90 days after amendment file date)
Note: If the date inserted in this block does no document's effective date on the Department of S	t meet the applicable statutory filing requirements, this date will not be listed as the State's records.
Adoption of Amendment(s) (CHI	ECK ONE)
☐ The amendment(s) was/were adopted by the in action was not required.	ncorporators, or board of directors without shareholder action and shareholder
■ The amendment(s) was/were adopted by the s by the shareholders was/were sufficient for ap	hareholders. The number of votes east for the amendment(s) pproval.
	shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):
"The number of votes cast for the amend	dment(s) was/were sufficient for approval
by	
(voti)	ng group)
Dated	2.1
	lent or other officer – if directors or officers have not been porator – if in the hands of a receiver, trustee, or other court by that tiduciary)
	Typed or printed name of person signing)
(1)	OWNER Resident
(1	Title of person signing)