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10/9/21

COVER LETTER

Tallahassee, FL 32314

TO:	Registration Se Division of Cor					
SUBJI	ECT:	Crypto <	School Live LLC ited Liability Company			
The en	nclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please	return all correspo	ndence concerning this matter	to the following:			
		Crys 1121 Porris Scott E-mail address: (Name of Person Name of Person Oto Schwl (IVE LC) Firm/Company S Old Tampa Address h A 3449 City/State and Zip Code Ging rid USA at the last of future annual report not	RUAD	- F	
For fui	\sim	oncerning this matter, please co		. (
	K-Hij Was 2	1 Person	at (<u>941</u>) <u>773</u> -	ne Telephone Numbe	<u> </u>	
Enclos	sed is a check for th	ne following amount:				
JE 23	25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	ate of Status &	
	Mailing Addres Registration S Division of C P.O. Box 632	Section orporations	Street Address: Registration Se Division of Co The Centre of	rporations		

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Articles of Organization for this Limited Liability Company we Florida document number $\frac{1.20000335753}{1.20000335753}$.	re filed on 10/22/2020		
Florida document number 1.200003.55755			_ and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liability	company here:		
Tin Roof Kraftz LEC			
The new name must be distinguishable and contain the words "Limited Liability (Company," the designation "LL	C" or the abbre	riation "L.L.C."
Enter new principal offices address, if applicable:	1215 Old Tampa Road	رب (۱۳۱	202
• •	arrish Florida 34219	TV.	S Th
		7.X	Ω ඎ ධ •ෲ
Enter new mailing address, if applicable:	1215 Old Tampa Road		o PR
(Mailing address MAY BE A POST OFFICE BOX)	arrish Florida 34219	<u></u>	<u> </u>
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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

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the

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>	Name	Address	Type of Action
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