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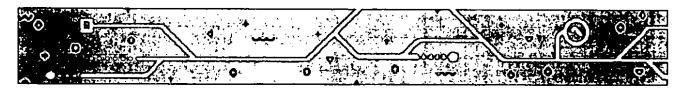
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zenbusiness

Nov 1, 2021

Florida Secretary of State Division of Corporations 2415 N Monroe St Suite 810 Tallahassee, FL 32303

RE: To The Moon Mining LLC

To Whom It May Concern:

Attached please find the executed <u>CERTIFICATE OF AMENDMENT</u>, for the above referenced. Please review and file the attached document on a routine basis.

Once completed please forward the filed confirmation or notification to the address listed below:

ZenBusiness Inc Attention: Kelly Castro 5511 Parkerest Dr., Suite 103 Austin Tx 78731

If you have any questions, please feel free to contact me at 844-493-6249 or at <u>fulfillment@zenbusiness.com</u>.

Thank you.

Kelly Castro ZenBusiness Customer Success

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| To The Moon Mining LEC | | |
|--|--|--|
| (<u>Name of the Limited Liability C.</u> (A Florida Lin | ompany as it now appears on our records.) nited Liability Company) | |
| Articles of Organization for this Limited Liability Compride document number 1.21000140651 | pany were filed on 03/25/2021 | and assigned |
| s amendment is submitted to amend the following: | | |
| If amending name, enter the new name of the limited | liability company here: | |
| NAM LLC | | |
| new name must be distinguishable and contain the words "Limited | Liability Company," the designation "LLC" or the a | abbreviation "L.L.C." |
| er new principal offices address, if applicable: | | |
| incipal office address MUST BE A STREET ADDRESS | S) | |
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| er new mailing address, if applicable: | | |
| niling address MAY BE A POST OFFICE BOX) | | |
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| If amending the registered agent and/or registered off nt and/or the new registered office address here: | | |
| If amending the registered agent and/or registered of | | |
| If amending the registered agent and/or registered of | | |
| If amending the registered agent and/or registered off nt and/or the new registered office address here: Name of New Registered Agent: | | |
| If amending the registered agent and/or registered off nt and/or the new registered office address here: | | |
| If amending the registered agent and/or registered off nt and/or the new registered office address here: Name of New Registered Agent: | fice address on our records, <u>enter the nar</u> Enter Florida street address | |
| If amending the registered agent and/or registered off nt and/or the new registered office address here: Name of New Registered Agent: | fice address on our records, <u>enter the nar</u> | ne of the new regis |
| If amending the registered agent and/or registered off nt and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: | fice address on our records, enter the nar Enter Florida street address City | |
| If amending the registered agent and/or registered off nt and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Registered Agent's Signature, if changing Registered Agent and accept the appointment as registered agent and | Enter Florida street address City Lagree to act in this capacity. I further as | ne of the new regis |
| If amending the registered agent and/or registered off nt and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: | Enter Florida street address Enter Florida street address City gent: agree to act in this capacity. I further agolete performance of my duties, and I am t as provided for in Chapter 605, F.S. Or | zip,Code Zip,Code gree to comply with familiar with and if this document |

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 |
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| ffective date, if other than the an effective date is listed, the date must stote. If the date inserted in this blocument's effective date on the December 1. | ock does not meet the app | dicable statutory filing | (optional) re than 90 days after filing requirements, this date |) .) Pursuant to 605.020 will not be listed a |
| record specifies a delayed effectively is filed. | e date, but not an effectiv | e time, at 12:01 a.m. o | n the earlier of: (b) T | ne 90th day after the |
| November 01 | . 2021 | · | | |
| 10/Tarras Por | n Gabet Signature of a member or at | | | |
| /S/ Tanner burot | 7 Uavel | | | |