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COVER LETTER

TO:	Registration Sec Division of Corp			
0		Moonshot Crypto Holdings LLC		
SUBJ	EC1:	Name of Limi	ted Liability Company	
The er	nclosed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please	return all correspon	ndence concerning this matter	to the following:	
		Sergio E. Bustamante		
			Name of Person	
		Bustamante Multi-Family I	Investment LLC	
			Firm/Company	
		930 NW 23rd Ave		
			Address	
		Miami, FL 33125		
			City/State and Zip Code	-
		sergiob@bmfinvestment.llc		***
.			to be used for future annual report not	incation)
For fu	rther information co	oncerning this matter, please or	ali:	
Sergio	E. Bustamante		786 301-6701	
	Name of	f Person		ne Telephone Number
Enclo	sed is a check for th	e following amount:		
≘ \$:	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 FI 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Moonshot Crypto Holdings LLC		
(Name of the Limited Liabli (A Florid	lity Company as it now appears on our records.) la Limited Liability Company)	
The Articles of Organization for this Limited Liability (Company were filed on April 22, 2021	and assigned
lorida document number L21000187234	<u></u> .	_
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the lim	nited liability company here:	
SOL Holdings LLC		
he new name must be distinguishable and contain the words "Lin	nited Liability Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADD	RESS)	
		-
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		·
3. If amending the registered agent and/or registere	d office address on our records, enter the na	me of the new regis
gent and/or the new registered office address here:		THE OF THE TENT CE IS
		5
Name of New Registered Agent:		<u> </u>
Name of New Registered Agent.		
New Registered Office Address:		<i>,</i> • • • • • • • • • • • • • • • • • • •
	Enter Florida street address	P:
	, Florida	
	City	Zip Code
		e 3

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 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
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
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effective date is listed, the date must e: If the date inserted in this blocument's effective date on the Dep	ck does not meet the app	licable statutory filing	e than 90 days after filing requirements, this dat	g.) Pursuant to 605.020 e wili not be listed a
cord specifies a delayed effective s filed.	date, but not an effective	e time, at 12:01 a.m. or	the earlier of: (b) T	he 90th day after the
ed July 29	2021			,
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lugs	ignature of a member or au	thorized representative o	f a member	<u> </u>
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Filing Fee: \$25.00