Page: 2 of 5 Division of Corporations



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Division of Corporations

Fax Number : (350)617-6383

From:

Account Name : 0 T CORPORATION SYSTEM

Account Number : FCA0000000023 Phone : (854)208-0445 Fax Kumber : (614)573-3996

**Enter the email address for this business entity to be used for future arma: report moilings. Enter only one small address please. **

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN GALAXY DIGITAL PRIME SERVICES LLC

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FEB - 2 2023

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION	I (1-4 must be completed	i)		~
Name of limited liability Company as it appears State: Galaxy Digital Prime Services LLC	on the records of the Flor	ida Department of		
Enter new principal office address, if applicable:			· -	
(<u>Principal office address</u> <u>MUST BE A STREET ADDRESS</u>)			·····	—
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				2023 FEB - 1
2. The Florida document number of this limited lia	bility company is: M2000	0008973	····	
3. Jurisdiction of its organization: Delaware				PH 2:
4. Date authorized to do business in Florida: 10/08	B/2020			2: 52
SECTION II (5-9 complete only the applicable of	•			
5. New name of the limited liability company: Go (must	alaxyOne Prime LLC contain "Limited Liability	· Company, " "L.L.C	" or "l.	
(If name unavailable, enter alternate name adopted copy of the written consent of the managers or marmust contain "Limited Liability Company," "L.L.C	aging members adopting t	ting business in Flori the alternate name. T	ida and at he alterno	tach a ite name
6. If amending the registered agent and/or registere registered agent and/or the new registered office ad	d officer address on our re l <u>dress here:</u>	cords, enter the nam	<u>e of the n</u>	<u>ew</u>
Name of New Registered Agent:				
New Registered Office Address:		lorida Street Address		
	City	Florida	Zip Code	

New Registered Agent's Signature, if changing Registered Agent:

Thereby 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 occept 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. Thereby confirm that the limited liability company has been notified in writing of this change.

Filing Fee: \$25.00



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY THAT THE SAID 'GALAXY DIGITAL PRIME

SERVICES LLC', FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS

NAME TO 'GALAXYONE PRIME LLC' ON THE FIFTH DAY OF DECEMBER, A.D.

2022, AT 3:11 O'CLOCK P.M.



seffrey W. Bullock, Setretary of Blate

Authentication: 202606079