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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : COMPUTERSHARE

Account Number : 110432003053

Phone Fax Number

: (561)694-8107 : (561)214-8442

**Enter the email address for this business entity to be used for future

annual report mailings. Enter only one email address please.** Email Address:___

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PLATINUM FUNDS LLC

Certificate of Status	0
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SEP 14 2020

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PLATINUM FUNDS LLC		
(Name of the Limited Liability ((A Florida Li	Company as it now appears on ou mited Liability Company)	r records,)
The Articles of Organization for this Limited Liability Con-		0 and assigned
Florida document number L10000022917		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	1 liability company here:	202
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES		
		5 5
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:		
Name of New Registered Agent:		· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
		Zip Code
New Registered Agent's Signature, if changing Registered Reg	gent:	
hereby accept the appointment as registered agent and		

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

Title	<u>Name</u>	Address	Type of Action
MGR	JIC TRUSTEES (USA) LTD	140 N PHILLIPS AVE, SUITE 301	∐Add
		SIOUX FALLS, SD 57104	Remove
			□ Change
MGR	JTC Corporate Services (USA), LLC	140 N PHILLIPS AVE, SUFTE 301	' \ Add
		SIOUX FALLS, SD 57104	□Remove
			☐ Change
			□Add
			Remove
			Change
			□Add
			□ Remove
			Chunge
		·	
			Remove
			Change
			□Add
			□ Remove
			Change

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). If amending any other informa	ation, enter change(s) here: (Attach additional sheets, if necessary.)	
 		
		<u></u>
		
		
		
		
Effective date, if other than the (If an effective date is listed, the date mus. Note: If the date inserted in this bi document's effective date on the D	e date of filing:	uant to 605.0207 () not be listed as th
he record specifies a delayed effective ord is filed.	ve date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th	h day after the
Dated September 12th	Juxalul J	
	Signification of a member or authorized representative of a member	
JTC Corporate Services	s (USA), LLC - MGR	
	Typed or printed name of signee	

Filing Fee: \$25.00