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COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT:

Coin Publishing LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Anthony Gallippi

Name of Person

Coin Publishing LLC

Firm/Company

411 E Amelia St

Address

Orlando, FL 32803

City/State and Zip Code

tony@bitcoinmagazine.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tony Gallippi

Name of Person

407 758-8628

Area Code & Daytime Telephone Number

Enclosed is a check for the 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, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED 2013 JAN 30 AM 10: 40 SECRETARY OF STATE TALLAHASSEE, FLORIDA

Coin Publishing LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited I	Liability Company were filed on	November 19, 2012	and assigned
Florida document number L12000145289	. <u>. </u>		
This amendment is submitted to amend the fol	llowing:		
A. If amending name, enter the new name	of the limited liability company	<u>here</u> :	
The new name must be distinguishable and end w "L.L.C."	ith the words "Limited Liability Co	mpany," the designation "LLC"	" or the abbreviation
Enter new principal offices address, if appli	cable:		
(Principal office address MUST BE A STRE	ET ADDRESS)		
·	<u> </u>	•	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	E BOY		
	- · · · · · · · · · · · · · · · · · · ·		
B. If amending the registered agent and registered agent and/or the new registered of		on our records, <u>enter the</u>	name of the new
Name of New Registered Agent:	Anthony Gallippi		
New Registered Office Address:	411 E Amelia St		
		Enter Florida street address	7
	Orlando	, Florida 3280	3
	City		Zip Code
N D!	D		

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 608, 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 Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager 🗼

MGRM = Managing Member **Title** <u>Name</u> **Address Type of Action** Str. X Nr. 29 Mihai Alisie MGRM Loc. Christian Remove Jud. Sibiu 557085 ROMANIA Charles B Lee 341 Levin Ave **MGRM** ✓ Add Mountain View, CA 94040 Remove Remove Remove Add Remove

lf amending any other infor	rmation, enter change(s) here: (Attach additional sheets, if necessary.)
<u> </u>	3
	
January 28	2013
	My Galling
Anthony Galli	Signature of a member of a horized representative of a member
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

SECRETARY OF STATE