# 116000112924

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FILING CANCELLED DUE TO RETURNED CHECK

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C GOLDEN
OCT 1 4 2019

### **COVER LETTER**

TO:

Registration Section

Division of Corporations
SUBJECT: International Monetary Specialist 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:  FILING CANCELLED DUE TO RETURNED CHECK
Jay Son Latez Name of Person
International Monetary Specialist LLC Firm/Company
7901 Kingspointe PKNy Ste. 8
Orlando, FL 3289  City/State and Zip Code  jay 500, 10107 @ Not mail. Com  E-mail address: (to the used for future annual report notification)
For further information concerning this matter, please call:
JaySon Lorz at 407, 409 - 11,50 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & \$\Bigcup \$55.00 Filing Fee & \$\Bigcup \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
MAILING ADDRESS:  Registration Section  Division of Corporations  P.O. Box 6327  Tallabasses FL 32314  STREET/COURIER ADDRESS:  Registration Section  Division of Corporations  Clifton Building  2661 Evecutive Center Circle

Tallahassec, FL 32301

DUE TO RETURNED CHECKARTION	TO	) DCANIZA	TION	
ARTIC	OLES OF O		ATION	
Menationa (Name of the Limited	Liability Compan	etary y as it now appe	Special ears on our records.)	ists LL(
The Articles of Organization for this Limited Lia Florida document number L1600112	bility Company v	vere filed on _	06/10/20	o   LØ and as
This amendment is submitted to amend the follow	ving:			
A. If amending name, enter the new name of t				
The new name must be distinguishable and contain the wor	rds "Limited Liabilit		<del>-</del>	4
Enter new principal offices address, if applical	ble:	1901	Kings p	onte ku
(Principal office address MUST BE A STREET	'ADDRESS)	<u>Or 14</u>	NO FL	<u>. 3281°</u>
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE B)  B. If amending the registered agent and/or registered agent and/or the new registered offi	r registered off		on our records,	enter the name
Name of New Registered Agent:	Jas	1800	Lope	
New Registered Office Address:	7901	Enter	SPOINT L	PKWY
	Or '	lando	, Flori	ida 32,
		City	, , , , , , , ,	Zip Code
New Registered Agent's Signature, if changing Re				
I hereby accept the appointment as registered provisions of all statutes relative to the proper accept the obligations of my position as regist being filed to merely reflect a change in the re company has been notified in writing of this co	r and complete p ered agent as pr egistered office a	performance or rovided for in	of my duties, and Chapter 605, F.	Lam familiar wi S. Or, if this doca
			M	
	If Chang	ging Registered	Agent, Signature of I	New Registered Age

Page 1 of 3

or removed from our records: MGR = Manager FILING CANCELLED AMBR = Authorized Member DUE TO RETURNED CHECK Title Address Type o Name John Nethustallah 3700 34th Street Sije 302 Ad Orbando, FL 32805 Ch: Jayson Lope Z Kingspointe Prwy Knd Ste 8 🗖 Rer Orlando FL 32819 Joshua Trent AMBR 7901 Kingspoine Kuy RAdi Ste 8 🗖 Ren Orlando 5 2 32 819 □ Add □ Rem □ Char □Add □ Rem □ Char □Add □ Řemc ☐ Chan

John Netmatallah failed to make the
capital contribution in the Registry of
Capital contribution in the Registry of Hensership Interest Units Agreement (ATTACH
Under the Annal Root for the Florida
Limited Liability Company Eiled May
20,2019 there was unauthorized usay
of my signature electronically submittee without my consent (see attached
without my consent ( see attached
FILING CANCELLED
——————————————————————————————————————
2016
E. Effective date, if other than the date of filing:  (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to Note:  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be document's effective date on the Department of State's records.
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the early (b) The 90th day after the record is filed.
Dated Sept 24 2019
Signature of a member or authorized representative of a member
Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00



having done so did subscribe same in my presence this I day of March, 2018.

INOTARY PUBLIC

NOTARY PUBLIC

NOTARY NAME PRINTED

REGISTRY OF MEMBERSHIP INTEREST UNITS

ATTACHMENT A - COMPANY ASSETS SCHEDULE OF MEMBERSHIP INTEREST

INTERNATIONAL MONETARY SPECIALISTS LLC

### PRIOR TO ASSIGNMENT TRANSFER

MEMBER NAME	CAPITAL CONTRIBUTION (CONTRACT COVERAGE VALUE)	PERCENTAGE OWNERSHIP
		90.00%
MR. JAYSON LOPEZ MR. JOSHUA TRENT		10.00%
PROFITS PARTNER NAME	CONTRIBUTION	NET PROFIT SHARE
NIL		<del> </del>
		<u> </u>

### INTERNATIONAL MONETARY SPECIALISTS LLC AFTER ASSIGNMENT TRANSFER

MEMBER NAME	CABITAL CONTRIBUTION (CONTRACT COVERAGE VALUE)	PERCENTAGE OWNERSHIP
U.S. Bigcoin, LLC, a Wyoming Limited Liability Company	Assignce, U.S. Bigcoin, LLC will have an option to purchase not just the 100% Company Interest in IMS, LLC but also to buy down the profit sharing agreement memorialized herein for a total sum of \$700,000.00 and this option is open for a period of 18 months from execution of this Agreement. Upon payment to Assignors of the \$1 million (in profit-sharing) plus the \$700,000, the \$0/50 profit-sharing will terminate and the Company will pay to the Assignors a royalty, in perpetuity, in the amount of 3.5% of the net	100.00%

II. Individually & Assignor & As Mgr. Mbr. of Company

JT idually as Assignor

Individually as Assigna

### FILING CANCELLED DUE TO RETURNED CHECK

- 7.8. Severability. No determination by any court, governmental body or otherwise that any provision of this Agreement or any amendment hereof is invalid or unenforceable in any instance shall affect the validity or enforceability of (a) any other provision thereof, or (b) that provision in any circumstance not controlled by the determination. Each such provision shall be valid and enforceable to the fullest extent allowed by law and shall be construed wherever possible as being consistent with, applicable law.
- 7.9. Further Assurances. The parties shall cooperate with each other and shall execute and deliver, or cause to be delivered, all other instruments and shall take all other actions, as the parties hereto may reasonably request from time to time in order to effectuate the provisions hereof.
- 7.10. Assumption and Indemnification. From and after the Effective Date, the Assignee shall (a) be bound by the provisions of the Operating Agreement as a Member of the Company, and (b) indemnify the Company against any expense incurred by it in connection with the Assignce's admission and substitution as a Member (including, by way of example rather than of limitation, any expense incurred in preparing and filing for record any amendment of the Operating Agreement or the Company's Declaration, and any other instrument, if necessitated by the admission and/or substitution).

IN WITNESS WHEREOF, each party hereto has executed this AGREEMENT or caused it to be executed on its behalf by its duly authorized representatives, the day and year first above written.

Individually se Assignor

**ASSIGNOR LOPEZ:** 

JAYSON LOPEZ, ASSIGNOR

ASSIGNEE:

BIGCOIN, LLC

John Kehmatallah, Managing Member

Name: Juhn Nelmata lah
JOHN NEHMATALLAH

lividually & Assignor & As Mgr.Mbr. of Company

**ASSIGNOR TRENT:** 

JOSHUA TRENT, ASSIGNOR

COMPANY:

MONETARY INTERNATIONAL

SPECIALISTS: LLC

By: Jason Lopez/Managing Member

Name: LAYSON)

Managing Member

Individually as Assigned

WEZ

TN

## FILING CANCELLED DUE TO RETURNED CHECK

WITNESSES & NOTARY CERT	FICATIONS:	
As to LOPEZ: •• 3/14  DATE  Katrina Chariton	<del></del>	OPEZ WITNESS SIGNATURE
Commission # 66022997 Expires: August 21, 2020 Bonded thre Auron Notary		TINESS NAME PRINTED
himself by Persecully 15 foregoing, understood the foregoing, 14 day of March, 2018.	I and who ex	vore or verified that he had madelle
NOTARY PUBLIC	NOTAR	NAME PRINTED
As to TRENT: 03-14-	<del></del>	RENT WITNESS SIGNATURE
COMMASSION COPPES MATCH SA, SCCO STATE OF UTAM	<u> </u>	TIMESS NAME PRINTED
		red Joshua Trent, who identified wore or verified that he had read the subscribe same in my presence this
NOTARY PUBLIC		Cottrell Y NAME PRINTED
As to U.S. BIGCOINS, LLC: • 🗘	DATE NETIMAT	ALLAH WITNESS SIGNATURE
Preprint	, (V	hris Persaud MINESS NAME PRINTED
himself by 10 100 110	ority, personally appeared	John Nehmatallah, who identified wore or verified that he had read the
Individually & Assignor & As Mgr.Mbr. of Company	Individually as Assignor	Individually as Ami

DOCUMENT# L16000112924

**Entity Name: INTERNATIONAL MONETARY SPECIALISTS LLC** 

May 20, 2019 Secretary of State 9253007804CC

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**Current Principal Place of Business:** 

3700 34TH ST. **SUITE 302** 

ORLANDO, FL 32805

#### **Current Mailing Address:**

3700 34TH ST. **SUITE 302 4026** ORLANDO, FL 32805 US

FEI Number: 47-1486509

Certificate of Status Desired: No.

Name and Address of Current Registered Agent:

UHRIG. HAROLD 3700 34TH ST. SUITE 302 4026

ORLANDO, FL 32805 US

Not authorized

The above named entry submits this statemen aurpose of changing its registered office or registered agent, or both, in the State of Florida

SIGNATURE: JAYSON LOPEZ

05/20/2019

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail:

Tibe MGA

Name

Tide

Name

NEHMATALLAH, JOHN

Address 3700 34TH ST.

SUITE 302

City-State-Ze: ORLANDO FL 32805

AMBR

CARDENAS ZAMBRANO, YENNY

PAOLA

Address 3700 34TH ST.

SUITE 302

City-State-Zip: ORLANDO FL 32605

Tele AMBR

Name UHRIG, HAROLD

Address 3700 34TH ST.

SUITE 302

City-State-Zip: ORLANDO FL 32805

Tele AMBR

Name UHRIG, JANET GAIL

Address 3700 34TH ST.

SUITE 302

City-State-Zip: ORLANDO FL 32805

I hardly cently that the information indicated on this report or incontental report is true and accurate and that my decriping profession shall have the same legal affect as if made under only. Her I am a managing member of manager of the lamfed hability company or the receiver or busines ampowered to execute the report as required by Chapter 425. Fitnes Statutes, an that my name appears above, or on an attachment such all other the ampounted.

SIGNATURE: JOHN NEHMATALLAH

**MANAGER** 

05/20/2019