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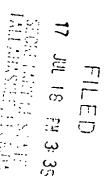
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COVER LETTER

SUBJECT: DOUBLE YOUR BITCOIN 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: THOMAS ARMOUR	
The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following:	
Please return all correspondence concerning this matter to the following:	
· · · · · · · · · · · · · · · · · · ·	
THOMAS ADMOUD	
Y	
Name of Person	
Firm/Company	
SGIS MAJOR BLUD.	:
Address : • :	∄ ¬⊓
ORLANDO / FLORIDA / 32819	
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For further information concerning this matter, please call:	ז
THOMAS ARMOUR at (407) 715 - 2152 Name of Person Area Code Daytime Telephone Number	
Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) □ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	

MAILING ADDRESS:

TO:

Registration Section

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

DOUBLE YOUR	
(Name of the Limited Liability Compar (A Florida Limited L	ny as it now appears on our records.) iability Company)
The Articles of Organization for this Limited Liability Company ville Florida document number <u>LI 7000136478</u> .	were filed on JUNE 22, 2017 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	lity company here:
MASTER COIN PLUS LLC	·
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	5323 MILLENIA LAKES BLU.D
(Principal office address MUST BE A STREET ADDRESS)	SHITE 300
	ORLANDO, FLORIDA 32839
Enter new mailing address, if applicable:	5323 MILLENIA LAKE BLUD.
(Mailing address MAY BE A POST OFFICE BOX)	SUITE 300
manning dearess mill be million of the bony	ORLANDO, FL 32839
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here Name of New Registered Agent:	
New Registered Office Address:	Enter Floridu street address
	City Florida - Zip Code
New Registered Agent's Signature, if changing Registered Agent:	City —Zip Code
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p heing filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

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 = A	Authorized Member		
<u>Title</u>	Name	Address	Type of Action
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ctive date, if other than the date of filing: (op	otional)
effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days at	ter filing.) Pursuant to 605.02
The state of the s	nis date will not be listed
e: If the date inserted in this block does not meet the applicable statutory filing requirements, t	
e: If the date inserted in this block does not meet the applicable statutory filing requirements, tument's effective date on the Department of State's records.	
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Page 3 of 3

Filing Fee: \$25.00

Certificate of Status

I certify from the records of this office that DOUBLE YOUR BITCOIN LLC, is a limited liability company organized under the laws of the State of Florida, filed electronically on June 22, 2017, effective June 17, 2017.

The document number of this company is L17000136478.

I further certify that said company has paid all fees due this office through December 31, 2017, and its status is active.

I further certify that this is an electronically transmitted certificate authorized by section 15.16. Florida Statutes, and authenticated by the code noted below.

Authentication Code: 170626111817-700300669337#1

Given under my hand and the Great Seal of the State of Florida at Tallahassee, the Capital, this the Twenty Sixth day of June, 2017

Ken Detzner Secretary of State