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## COVER LETTER

то:	Registration Sec Division of Cor		,		
41 1 1 <b>2 3</b> 4 4	GOLD COI	N STORES LLC			
SUBJI	ECT:	Name of Lin	nited Liability Company		
The en	closed Articles of a	Amendment and fee(s) are sub	omitted for filing.		
Please	return all correspon	ndence concerning this matter	to the following:		
		Randall C. Smi	th Esa		
			Name of Person		
		Smith Brown PL			
			Firm/Company		
		533 Versailles	Dr Suite 100		
			Address		
		Maitland, FL 3	2751	Fire	젊
			City/State and Zip Code		<u> </u>
		rubysalhotra	91@icloud.com		MON TON
		E-mail address: (	to be used for future annual report noti:	fication)	ا ا
For fur	ther information co	oncerning this matter, please c	all:	fication) Section Fig. 17. URB	W-6 7
	Randall C.	Smith	407-599-0002	<u>-</u> =	 
	Name of	Person	at () Area Code Daytim	e Telephone Number,	_ [
Enclos	ed is a check for th	e following amount:			
<b>Ğ</b> <sup>X</sup> \$2:	5.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60,00 Filing Certificate o Certified Cop (additional copy	f Status & py
	Registra Division P.O. Bo	NG ADDRESS: ation Section of Corporations of 6327 ssee, FL 32314	STREET/COURI Registration Section Division of Corpor Clifton Building 2661 Executive Ce Tallahassee, FL 32	on rations enter Circle	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GOLD COIN STORES LLC			
(Name of the Limited Liability (A Florida I	Company as it now appears on our Limited Liability Company)	records.)	
The Articles of Organization for this Limited Liability Co Florida document numberL17000226763	ompany were filed on Novembe	er 2, 2017	and assigned
	<u>-</u> ·		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limit	ed liability company here:		
The new name must be distinguishable and contain the words "Limite Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRE		n "LLC" or the abbrevi	ation "L.L.C."
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		TALLAHASSE	
B. If amending the registered agent and/or registered agent and/or the new registered office addresses		ecords, enter the	name of the nev
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street	t address	
	City	, Florida Z	ip Code

## 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 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 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 = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Richard Evans	533 Versailles Dr, Suite 100	
		Maitland FL 32751	XX Remove
			Change
MGR	Gurdeep Salhotra	533 Versailles Dr, Suite 100	X <b>K</b> ) Add
		Maitland FL 32751	□ Remove
		<del></del>	Change
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