6/30/22, 4 52 PM

Division of Corporations



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : DOSSANTOS AND MACHADO, LLC

Account Number : 120140000089 Phone : (754)301-2128 : (954)252-4650 Fax Number

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address: INFO@GFSTAXACCT.COM

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CRYPTAL DIGITAL LLC

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K. Brumbley

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From: Juliana dos santos

From: Juliana dos santos

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COVER LETTER

	istration Sec ision of Corp			
CUBICCT.		DIGITAL LLC		
SORTEC 1:		Name of Lim	ited Liability Company	
The enclosed	Articles of	Amendment and fec(s) are sub	mitted for filing.	
Please return	all correspon	ndence concerning this matter	to the following:	
		JULIANA MACHADO, C	PA.	
			Name of Person	
		GFS TAX & ACCOUNTI	NG SERVICES	
			Firm/Company	
		11764 W SAMPLE RD ST	TE 102	
			Address	·····
		CORAL SPRINGS, FL 33	065	
			City/State and Zip Code	
		JULIANA@GFSTAXACC		
		E-mail address: (to be used for future annual report not	ificationi
For further in	formation co	oncerning this matter, please c	alf:	
JULIANA M	IACHADO,	CPA	754 301-2128	
	Name of	Person	Arca Code Daytin	ne Telephone Number
Enclosed is a	check for th	e following amount:		
≘ \$25.00 F	iling Fec	☐ \$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)
	ling Address		Street Address: Registration Se	ection
Div	ision of C	orporations	Division of Co	rporations
). Box 632° lahassee, F		The Centre of	Tallahassee oc Street, Suite 810
1 91	imiassee, L	ピンセンにコ	2713 14. 010100	to proper parse and

Tallahassee, FL 32303

2022-06-30 21:06:35 GMT

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From: Juliana dos santos

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

CRYPTAL DIGITAL LLC	
(Name of the Limited Liability Company as it now appears of (A Florida Limited Liability Company)	n our records.)
The Articles of Organization for this Limited Liability Company were filed on 08/17	/2018 and assigned
Florida document number L18000197694	
This amendment is submitted to amend the following:	
This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailling address MAY BE A POST OFFICE BOX) C.3 OI B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent:	
The new name must be distinguishable and contain the words "Limited Liability Company," the desi	gnation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	2022
(Principal office address MUST BE A STREET ADDRESS)	
	
Enter new mailing address, if applicable:	. =
(Mailing address MAY BE A POST OFFICE BOX)	· · · · · · · · · · · · · · · · · · ·
B. If amending the registered agent and/or registered office address on our recongent and/or the new registered office address here:	ords, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address: Enter Florida	street address
	, Florida
City	Zip Code

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.

4220002257723

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>Name</u>	Address	Type of Action
RIBEIRO MALATO, CAROLINE	80 S.W 8TH ST	
	STF. 2000	■Remove
	MIAM1, FL 33130	☐Change
		☐Remove
		Change
		□Add
		□Remove
		(DAdd
		□Remove
		Change
		⊡Add
		□ Remove
		Change
		□Add
		Remove
	RIBEIRO MALATO, CAROLINE	RIBEIRO MALATO, CAROLINE STE 2000 MIAMI, FL 33130

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ote: If	e date, if other than the date of filing:	207 (as t
record s is filed	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the	he
JU.	NE 30TH 2022	
	MARIS	
	Signature of a member or authorized representative of a member	