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NUTLER 12 2023

COVER LETTER

TO: Registration Section Division of Corporations	;		
SUBJECT:	L Bitcoin Re Name of Limited Li	ability Company	
The enclosed Articles of Amendmo	int and fee(s) are submitted	I for tiling.	
Please return all correspondence co	oncerning this matter to the	following:	
_	Gary	Alcxis Jr.	
	The Bi	Firm/Company	LLC
12	20 NW. 129"	Street	
	Miami, Fl	33 167 y/State and Zip Code	
	C) in you ex	15 313 @ms n. 0	incation)
For further information concerning	this matter, please call:		
Gary Alex Name of Person	15 Jr.	_ at (<u>904</u>) <u>607</u> Area Code Daytin	14 28 ne Telephone Number
Enclosed is a check for the following	ng amount:		
	0.00 Filing Fee & Grifficate 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		Street Address: Registration Se	ection

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Mame of the Limited Liabil (A Florid	Reserve LLC ity Company as it now appears on of a Limited Liability Company)	2023 FEB 22 AM 7: 58
The Articles of Organization for this Limited Liability (Florida document number <u>L2000000726</u>	t t	1/202D and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim The BTC Reserve LLC The new name must be distinguishable and contain the words "Lin Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADD)	nited Liability Company," the designa	tion "LLC" or the abbreviation "L.L.C"
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registere agent and/or the new registered office address here:		is, enter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida st	reet address
		, Florida
	Cav	Zip 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

Title	Name	Address	Type of Action
			□Add
			Remove
			□Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			Change
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			□Change
		□Add	
			□Remove
			☐ Change
		□Add	
			□Remove
			□Change

H amend	ing any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	·
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-	······································
Note: 114	date, if other than the date of filing:
ord is filed.	
Dated /	Signature of a member or authorized representative of a member Cary Hexis 5- Typed of printed name of signee
	Signature of a member or authorized representative of a member
	Gory Alexis J.

Filing Fee: \$25.00



January 18, 2023

GARY ALEXIS 1220 NW. 129TH STREET MIAMI, FL 33167 US

SUBJECT: THE BITCOIN RESERVE LLC

Ref. Number: L20000007267

We have received your document for THE BITCOIN RESERVE LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA., but your entity is a FLORIDA LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 223A00001145

Anissa Butler Regulatory Specialist II

FEB 2 2 2023