L21000281910

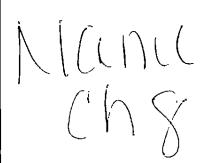
(Req	uestor's Name)	-
(Add	ress)	
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(City	/State/Zip/Phone	= #)
PICK-UP	WAIT	MAIL.
(Bus	iness Entity Nar	ne)
(Doc	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer	

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JUL 08 7021 I ALBRITTON

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 07/07/2021	-		esti/AIV Ta
			₩ALK IN
ENTITY NAME Jordan	Hernandez Blockchai	n Advising and Yield Farn	ning LLC
DOCUMENT NUMBER			
_	**PLEASE FILE THE	ATTACHED AND RETURN*	**
xxxx	Plain Copy		
	Certified Copy		
	Certificate of Status		
	Certified Copy of Arts Certificate of Good Stan		
	**APOSTILLE' / NO	OTARIAL CERTIFICATION	**
COUNTRY OF DESTINAT	TON		
NUMBER OF CERTIFICA	TES REQUESTED		
TOTAL OWED \$25.00		ACCOUNT #: 12	20160000072
		5. R	THO
Please call Tina at th	he above number for a	ny issues or concerns. T	

COVER LETTER

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Tallahassee, FL 32314

TO:

	egistration Se ivision of Cor			
11 4 1 4 5 4 P 2 2 1 T		nandez Blockchain Advising a	nd Yield Farming LLC	
SUBJECT:Name of Lin			ited Liability Company	
The enclos	ed Articles of	Amendment and fec(s) are sub	mitted for filing.	
Please retu	rn all correspo	ondence concerning this matter	to the following:	
		Fabrizio Lengua		
			Name of Person	
		ZenBusiness INC.		
			Firm/Company	
		5511 Parkerest Dr. Suite 2	07	
			Address	
		Austin, TX 78731		
			City/State and Zip Code	
		fulfillment@zenbusiness.ed		
		E-mail address: (to be used for future annual report no	tification)
For further	information c	oncerning this matter, please c	all:	
Fabrizio L	.engua		512 237-7349 at ()	
	Name o	f Person	Area Code Dayti	me Telephone Number
Enclosed is	s a check for th	ne following amount:		
\$25.00) Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	<u> Iailing Addres</u> egistration S		Street Address: Registration S	ection
	ivision of C		Division of Co	
P	.O. Box 632	.7	The Centre of	
Т	allahassee. I	FL 32314	2415 N. Monr	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Town of the second of the seco

Jordan Hernandez Blockchain Advising and Yield Farming LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company	were filed on 06/21/2021	and assigned
Florida document number L21000287910		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
Red Oak Blockchain Strategies LLC		
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(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 a	address on our records, enter th	e name of the new registered
agent and/or the new registered office address here:	<u> </u>	
Name of New Registered Agent:		
New Registered Office Address:		
New Negation of the Francis.	Enter Florida street address	
	, Flori	
·	Citv	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

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Remove
			□Change
			□Remove
			□ Change
			□Remove
			Change
			□ Add
			□Remove
			Change
			□Remove
			□Change
			□Remove
			□ Change

Page 2 of 3

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ffective date, if other than the an effective date is listed, the date mus	ock does not meet the applicable sta	of filing or more than 90 days after filing atutory filing requirements, this dat	l) g.) Pursuant to 605,0207 te will not be listed as
ocument's effective date on the Do			
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Page 3 of 3

Filing Fee: \$25.00