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COVER LETTER

TO:

| | ration Sec on of Corp | | | |
|-------------------|--------------------------|--|---|--|
| Describility | GS Trading | g LLC | | |
| SUBJECT: | | Name of Lim | ted Liability Company | |
| The enclosed A | rticles of A | Name of Limited Liability Company Amendment and fee(s) are submitted for filing. Indence concerning this matter to the following: Valerie Fasciglione Name of Person Alliance Financial Services of Florida LLC Firm/Company 2101 Vista Parkway STE 125 Address West Palm Beach, FL 33411 City/State and Zip Code vfascig@allianceafs.com E-mail address: (to be used for future annual report notification) concerning this matter, please call: | | |
| Please return all | correspon | dence concerning this matter | to the following: | |
| | | Valerie Fasciglione | | |
| | | | Name of Person | |
| | | Alliance Financial Services | of Florida LLC | |
| | | | Firm/Company | ··· |
| | | 2101 Vista Parkway STE 1 | 25 | |
| | | | Address | |
| | | West Palm Beach, FL 3341 | l | |
| | | | City/State and Zip Code | |
| | | | | |
| | | E-mail address: (1 | o be used for future annual report not | ification) |
| For further info | rmation co | ncerning this matter, please ca | 11: | |
| Valerie Fascigli | one | | | |
| | Name of | Person | | ne Telephone Number |
| Enclosed is a ch | eck for the | e following amount: | | |
| ■ \$25.00 Filin | ng Fee | | Certified Copy | Certificate of Status & Certified Copy |
| | g Address tration So | = | <u>Street Address:</u> Registration Se | ection |
| _ | | rporations | Division of Co | |
| P.O. I | 30x 6327 | , ` | The Centre of T | Γallahassee |
| Tallah | nassee, F | L 32314 | 2415 N. Monro | e Street, Suite 810 |

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

DGS TRADING USA LLC

2022 JUN -7 AM 9: 56

| (Manie of the Light) | (A Florida Limited | Liability Company) | SEURE PARY OF STATE TALLAHASSEE, FL | |
|---|----------------------------|---------------------------------|--|--|
| The Articles of Organization for this Limited Li | ability Company | were filed on 03/30/2022 | and assigned | |
| Florida document number L22000154929 | | | | |
| This amendment is submitted to amend the follo | owing: | | | |
| A. If amending name, enter the new name of | the limited liab | oility company here: | | |
| he new name must be distinguishable and contain the w | ords "Limited Liabi | ility Company," the designation | "LLC" or the abbreviation "L.L.C." | |
| Enter new principal offices address, if applicable: | | 2101 Vista Parkway | | |
| (Principal office address MUST BE A STREET ADDRESS) | | STE 125 | | |
| | | West Palm Beach, FL 33 | 411 | |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | 2101 Vista Parkway | | |
| | | STE 125 | | |
| | | West Palm Beach, FL 33 | 411 | |
| B. If amending the registered agent and/or regent and/or the new registered office address Name of New Registered Agent: | s here: | address on our records, g | | |
| | 2101 Vista Parkway STE 125 | | | |
| N. D 1000 A.L. | | Enter Florida street address | | |
| New Registered Office Address: | | Enter Florida street d | address | |
| New Registered Office Address: | West Palm Bea | | _, Florida 33411 | |

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 |
|--------------|--------------------|---------------------------|----------------|
| AP | Pierpalo Stancato | 1518 Drexel Ave | |
| | | Apt A5 | ■Remove |
| | | Miami Beach, FL 33139 | □Change |
| AP | Pierpaolo Stancato | 1518 Drexel Ave | Add |
| | | Apt A5 | □Remove |
| | | Miami Beach, FL 33139 | □Change |
| AMBR | Enzo Stancato | 2101 Vista Parkway | ≣ A₫d |
| | | Ste 125 | □Remove |
| | | West Palm Beach, FL 33411 | □Change |
| | | | □Add |
| | | | □Remove |
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| ffective date, if other than the an effective date is listed, the date must ote: If the date inserted in this blo | be specific and cannot bock does not meet the | e prior to date of | filing or more than | 90 days after fil | ling.) Pursulate will n | iant to 60 iot be li: | 05.020° sted as |
| ocument's effective date on the De | | | | | | | |
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| record specifies a delayed effective is filed. | date, but not an effec | ctive time, at 12 | 2:01 a.m. on the e | arlier of: (b) | The 90th | i day afi | er the |
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| ated | , 2022 | | | | | | |
| ated | , 2022 Signature of a member of | | resentative of a me | mber | | | |