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(Re	equestor's Name)	
(Ád	ddress)	
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(Cit	ty/State/Zip/Phone	e #)
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Y. SCOTT 0CT 1 5 2023

COVER LETTER

TO:	Registration Section Division of Corporation		•		
SUBJE	СТ:	CS&B Entr	CYPTISE L.L.C.		
The enc	closed Articles of Art	nendment and fee(s) are subj	nitted for filing		
		ence concerning this matter t			
ricisci	eturi an corresponde	nee concerning this matter i	o ne tonowing.		
		Chantel	Payley Name of Person		
			Firm/Company		
		2114 N	Flamingo Road -	#2193	DIVIS 2023
		Pembroka	Pines, FL 3302 City/State and Zip Code	8-3501	DIVISION OF CORPORATIONS 2023 OCT -3 PM 3: 10
	-	Charte laD701	Degmal (1) M o be used for future annual report notifi	cation)	PH 3: 10
For furt	her information cond	erning this matter, please ca	di:		1048
<u> </u>	hantel p	aley	at (784) 414-6 Area Code Daytime	9757 Telephone Number	_
Enclose	d is a check for the f	ollowing amount:			
□ \$25	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing F Certificate of S Certified Copy (additional copy is	Status &
	Mailing Address: Registration Sec	tion	Street Address: Registration Sec	tion	
	Division of Corp		Division of Corp	orations	
	P.O. Box 6327		The Centre of Ta	ıllahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company	e L.L.C.	
(Name of the Limited Liability Compan- (A Florida Limited Lia	ability Company)	
The Articles of Organization for this Limited Liability Company we Florida document number 12300130281.	were filed on 03 14 20	23 and assigned
This amendment is submitted to amend the following:		SECRE DIVISION 2023 OCT
A. If amending name, enter the new name of the limited liabil		FILED JARYO -3 P
The new name must be distinguishable and contain the words "Limited Liabilit	y Company," the designation "LLC" or th	ne abbrev iati on "BLC."
Enter new principal offices address, if applicable:		- 5 8 -
Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2114 N Flamingo remboke Pines, Fl	Road #2193 . 33028-3501
B. If amending the registered agent and/or registered office acagent and/or the new registered office address here:	idress on our records, <u>enter the n</u>	name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	Florida	Zip Code
	Zuk	zip Cone

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 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
			□Add
			□Remove
			□Change
		<u> </u>	□Add
			2023 OC.
			ZOAS OCT +3 PH 3: 10
			
			□Remove
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fective date, if other than in effective date is listed, the date ote: If the date inserted in the cument's effective date on the	e must be specific ar nis block does not	nd cannot be prior to meet the applicab			iling.) Pursuant to 605.0207
ecord specifies a delayed eff is filed.	ective date, but no	ot an effective tim	e, at 12:01 a.m. o	n the earlier of: (b)	The 90th day after the
ucd <u>September</u>	28+11)	2023			
	Signature of a	n member or authori	zed representative	of a member	