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COVER LETTER

TO:

Registration Section

P.O. Box 6327

Tallahassee, FL 32314

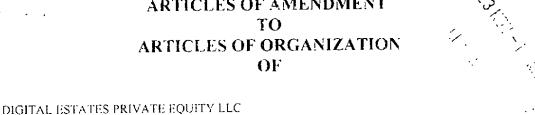
Division of Cor	rporations			
ern re <i>e</i> r.	DIGITAL EST	ATES PRIVATE EQUITY LLC		
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
		Jesse DeLeon		
		Name of Person		
	***	Firm/Company		
	100 BAYVIEW DRIVE,P			
		Address		
	SUNNY ISLES BEACH,			
	Eshrem@Shremlegal.com	City/State and Zip Code		
	E-mail address: (to be used for future annual report not	ification)	
For further information o	concerning this matter, please co	ail:		
Eddie Shrem, Esq.		917 589-0519		
Name o	i Person	at () Area Code Daytin	ne Telephone Number	
Enclosed is a check for the	ne following amount:			
■ \$25.00 Filing Fee	☐ \$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 radditional copy is enclosed:	
Mailing Address Registration 5	Section	<u>Street Address:</u> Registration Se		
Division of Corporations		Division of Corporations		

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION



oy as it now appears on our records.) Inbility Company)	
	•
were filed on October 12, 2023	and assigned
lity company here:	
ty Company," the designation "LLC" or the	abbreviation "L.L.C."
· · · · · · · · · · · · · · · · · · ·	
ddress on our records, <u>enter the n</u>	ame of the new registere
Enter Florida street address	
, Florida	Zin Coda
	ddress on our records, enter the ne

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>	<u>Address</u>	Type of Action
			⊆ Add
			□Remove
			[Change
			⊒Add
			CRemove
			☐ Change
			□Add
			□Remove
			□Change
			□Add
			□ Change
			□Add
			□Remove
			Change
			□Add
			□Renove
			□Change

					
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Effective date, if other an effective date is listed Note: If the date insert document's effective d	ed in this block does t	not meet the applic	able statutory filing	(optional) re than 90 days after filing requirements, this date	.) Pursuant to 605.0207 will not be listed as
	yed effective date, but	t not an effective ti	ime, at 12:01 a.m. oi	the earlier of: (b) Th	ne 90th day after the
d is filed.		2022			
October 27	•	2023			
	11/	2023	·		
October 27	In Sa	·	orized representative of	t a member	

Filing Fee: \$25.00