

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:			ו על	2024	
	Division of Co	rporations	í.		-
	Fax Number	: (850)617-6383	ر تر	DOCT DOCT	
From:					Γ
	Account Name	: ZENBUSINESS INC.		<u>भ</u> द्र	
	Account Number	: 120230000190		Fig. PH	_
	Phone	: (844)449-3624			
		: (512)597-0678		101	
		this business entity			
annual	réport mailings.	Enter only one email	address please.**	×	

Email Address:_

Electronic Filing Menu

C AMND/RESTATE/CORRECT OR M/MG RESIGN BETTOR TOKEN LLC		
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Corporate Filing Menu

Help

2024-11-01 08:25:29 UTC+14 COVER LETTER

18506176383

TO: Registration Section Division of Corporations

Bettor Token LLC
SUBJECT:

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Allison Monzon

Name of Person

ZenBusiness INC

Firm/Company

336 E. College Ave Suite 301

Address

Tallahassee, FL 32301

City/State and Zip Code

fulfillment@zenbusiness.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Enclosed is a check for the following amount:

🖿 \$25.00 Filing Fee

☐ \$30.00 Filing Fee & Certificate of Status

□ S55.00 Filing Fee & Certified Copy (additional copy is enclosed) ➡ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Malling Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

· Page: 3 of 5	2024-11-01 08:25:29 UTC+14 ARTICLES OF A TO		506176383	From: ZenBusiness User FILED 24 OCT 31 PM 4: 10
	ARTICLES OF OR OF	GANIZATIC	N 20,	24 OCT 31 000
Bettor Token LLC (Name of	the Limited Liability Company (A Florida Limited Liab	<u>as it now appears on</u> ility Company)	aur records.)	CRETARY OF STATE AHASSEE, FLORIDA
The Articles of Organization for this L Florida document number <u>L240002607</u>		re filed on 2024-66	5-07	and assigned
This amendment is submitted to amen	d the following:			
A. If amending name, enter the new	name of the limited liabilit	y company here:		
The new name must be distinguishable and co Enter new principal offices address, (Principal office address MUST HE A	if applicable: 	Company," the design	ation "LLC" or the a	bbreviation "L.L.C."
Enter new mailing address, if applic (Mailing address MAY BE A POST O				
B. If amending the registered agent	and/or registered office add	ress on our recor	ds, <u>enter the nan</u>	ne of the new registered
agent and/or the new registered offic	e address here:			
Name of New Registered Ag	<u>eni</u> :			
New Registered Office Addr	<u>ess</u> :	Enter Florida si	reet address	
			, Florida	
		City		Zip Code

New Registered Agent's Signature, if changing Registered Agent:

To:

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

Page: 4 of 5 2024-11-01 08:25:29 UTC+14 18506176383 From ZenBusiness User in amending Authorized Person(s) authorized to manage, <u>enter mentile, name, and address of each person being added</u> or removed from our records:

MGR = Manager AMBR = Authorized Member

To:

	oken Holdings LLC		
		6232 Sea Air DriveApollo Beach, FL 33572	🖬 Add
(care (of Matthew)	<u></u>	— Acc
			□Change
<u></u>			🗆 Add
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			Change

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To:

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

	<u> </u>
<u> </u>	
Note: If the date inserted i	an the date of filing: (optional) late must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) this block does not meet the applicable statutory filing requirements, this date will not be listed as the a the Department of State's records.
If the record specifies a delayed record is filed.	effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated ^{10/31}	
/s/ Matt	new Taylor Signature of a member or authorized representative of a member
	Signature of a memoer of authorized representative of a memoer
Matthew Taylor	
<u>-</u>	Typed or printed name of signee