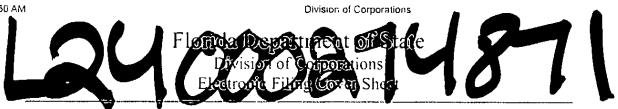
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From:

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Phone : (718)925-2025
Fax Number : (718)925-2027

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

C	F	
· .	7	*
Mynt Gold LLC		
(Name of the Limited Liability Comp. (A Florida Limited	iny as it now appears on our records. Liability Company)	.)
he Articles of Organization for this Limited Liability Company lorida document number <u>L24000274871</u> .	were filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	Mynt Gold LLC	
Principal office address MUST BE A STREET ADDRESS)	100 Biscayne Blvd. Ste 2303	
	Miami, FL 3313	<u> </u>
Enter new mailing address, if applicable:	Mynt Gold LLC	7024 AUG 2
(Mailing address MAY BE A POST OFFICE BOX)	100 Biscayne Blvd. Ste 2303	7
	Miami, FL 3313	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, <u>enter t</u>	he name of the new registe
New Registered Office Address:	Enter Florida street address	
	, Flor	rida
	City	Zip Code
lew Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as poing filed to merely reflect a change in the registered office company has been notified in writing of this change.	ee to act in this capacity. I furt performance of my duties, and provided for in Chapter 605, F	l I am familiar with and .S. Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

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(((1124000283115 3)))

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>	Name	Address	Type of Action
			□Remove
			Change
			□Remove
			□Add
			□Remove
			Change
			□Add
			□Change
			Remove
• 1			ПСhалде
			🗆 Add
			□Remove

.08/27/2024 16:26 From:17189252027 To:18506176381 Date Time 08/27/24 04:26PM Pages: 4 P: 4/4 (((1124000283115 3))) D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed. Dated August 22

/s/Mirian Schwarts
Signature of a member or authorized representative of a member

Miriam Schwartz

Typed or printed name of signee