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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:						
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	Fax Number : (850)617-6383					
From:						
	Account Name : REGISTERED AGENTS INC.					
	Account Number : I20090000081					
	Phone : (307)200-2803					
	Fax Number : (813)436-5206					

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MINDSET CURRENCY LLC

Certificate of Status	0
Certified Copy	0
age Count 04	
Estimated Charge	\$25.00

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Mindset Currency LLC			
(Name of the Limited Liability Company as it now appe (A Florida Limited Liability Company	ears on our records.)		
he Articles of Organization for this Limited Liability Company were filed on $\frac{1}{2}$ lorida document number $\frac{124000478156}{1}$	and assigned		
his amendment is submitted to amend the following:			
If amending name, enter the new name of the limited liability company	<u>here</u> :		
he new name must be distinguishable and contain the words "Limited Liability Company," the	e designation "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:			
Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BOX)			
······································			
3. If amending the registered agent and/or registered office address on our	records, enter the name of the new regist		
gent and/or the new registered office address here:	i (g		
Name of New Registered Agent:			
New Registered Office Address:			
	lorida street address		
	, Florida		
Cay	, Florida Zıp Code		

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.

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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
AMBR	YANG, KYRA	7901 4TH ST N STE 300	
		ST PETERSBURG, FL 33702	□Remove
			Change
AMBR	KJY LLC	7901 4TH ST N STE 300	☑Add
		ST PETERSBURG, FL 33702	-
			Change
			□ Add
			□Remove
			☐ Change
			FAdd
			□Remove
			☐ Change
			□Add
			☐Remove
			Change
 .		·	
			□Remove
			□ Change

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D. If amending any other info	ormation, enter change(s) here: (.	Attach additional sheets, if necessary.)	
			
 			
			
	 		
			
Note: If the date inserted in t	n the date of filing: te must be specific and cannot be prior to de his block does not meet the applicable the Department of State's records.	(optional) ate of filing or more than 90 days after filing.) Pursuant statutory filing requirements, this date will not be	to 605.0207 (3)(b) be listed as the
If the record specifies a delayed et record is filed.	fective date, but not an effective time.	at 12:01 a.m. on the earlier of: (b) The 90th da	y after the
Dated Dec 6	. 2024 MAN 16/		
1/34-5	ing of he	d representative of a member	

Typed or printed name of signee