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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : FISHER, TOUSEY, LEAS & BALL
Account Number : I19990000021
Phone : (904)356-2600
Fax Number : (904)355-0233

2025 SEP 25 AM 11:51

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

Email Address: corpfilings@fishertousey.com

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
CRYPTO ASSET MANAGMENT LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

2025 SEP 25 AM 11:10

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

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CRYPTO ASSET MANAGMENT LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 06/03/2025 and assigned
Florida document number L25000260146.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

501 RIVERSIDE AVENUE, SUITE 700

(Principal office address MUST BE A STREET ADDRESS)

JACKSONVILLE, FLORIDA 32202

Enter new mailing address, if applicable:

130 CORRIDOR ROAD

(Mailing address MAY BE A POST OFFICE BOX)

P.O. BOX 5

PONTE VEDRA BEACH, FLORIDA 32082

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: FT CORPORATE SERVICES, LLC

New Registered Office Address: 501 RIVERSIDE AVENUE, SUITE 700

Enter Florida street address

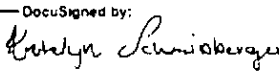
JACKSONVILLE, Florida 32202

City

Zip 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.

DocuSigned by:

CEA04EEFF-3A8D-4...
If Changing Registered Agent, Signature of New Registered Agent

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Docusign Envelope ID: 47B916A7-814E-4CF9-A1F1-F7FD8B72D935

If amending Authorized person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

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MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	AHMED D. ISLIM	130 CORRIDOR ROAD	☐ Add
		P.O. BOX 8	☐ Remove
		PONTE VEDRA BEACH, FLORIDA 32082	☒ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
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			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

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

[illegible]

E. Effective date, if other than the date of filing: _____ (optional)

(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 September 22, 2025

DocuSigned by:
Alimed Dinar Islm
 Signature of a member or authorized representative of a member

AHMED D. ISLIM

Typed or printed name of signee