P18000052772

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Date:

	Acc#I20160000072	
Name:	TradeStation Crypto, Inc	
Document #:		
Order #:	15496227	
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing: Certified Copy of		
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: TradeStation Crypt	o, Inc.	
DOCUMENT NUN	1BER: P18000052772		
	es of Amendment and fee are su	bmitted for filing.	
Please return all corr	respondence concerning this ma	tter to the following:	
	Sara Rawson		
	 	Name of Contact Persor	1
	Payward, Inc.		
		Firm/ Company	
	100 Pine St. Ste. 1250 PMB	B297	
	·	Address	
	San Francisco, CA 94111		
		City/ State and Zip Cod	2
	governance@kraken.com		
		sed for future annual report	notification)
For further informat	ion concerning this matter, plea		239-7458
Nam	e of Contact Person	Area Co) 239-7458 de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Dep	artment of State:
□ \$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	➤ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
A D P	lailing Address mendment Section ivision of Corporations O. Box 6327	Amend Division The C	Address dment Section on of Corporations centre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

Articles of Amendment to Articles of Incorporation of

FILED

2024 APR 16 PM 1: 30

FradeStation Crypto, Inc.			<u> </u>	
(Name o	f Corporation as current	ly filed with the Florida Dept. of State	ORETARY OF ST ALLAHASSEF. F	
18000052772		···		
	(Document Number of	of Corporation (if known)		
Pursuant to the provisions of section 607.1 ts Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts the following	owing amendment(s)	
A. If amending name, enter the new na	me of the corporation:			
Payward Interactive, Inc.	•		The new	
name must be distinguishable and contain 'Inc.," or Co.," or the designation "C 'chartered," "professional association,"	'orp," "Inc," or "Co".	company," or "incorporated" or the abbre A professional corporation name must c	viation "Corp.," ontain the word	
, ,		106 E. Lincolnway		
 Enter new principal office address, Principal office address <u>MUST BE A S</u> 	TREET ADDRESS)	Fourth Floor		
		Cheyenne, WY 82001		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		106 E. Lincolnway		
		Fourth Floor		
		Cheyenne, WY 82001		
D. If amending the registered agent an new registered agent and/or the new	d/or registered office address registered office address CT Corporation System	tress in Florida, enter the name of the s:		
Name of New Registered Agent				
	1200 South Pine Island R	<u> </u>		
		reet address)	324	
New Registered Office Address:		, Florida,	(Zip Code)	
New Registered Agent's Signature, if c	hanging Registered Ager	nt:		
I hereby accept the appointment as regist	ierea ageni i am Jamiliai	with and accept the obligations of the pos	*********	
/s/ J:	ames Martin - James I	Martin - Assistant Secretary		
	Signature of New	Registered Agent, if changing		
Check if applicable The amendment(s) is/are being filed p	G			

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Example:

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u>	John Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	CEOD	P Jeremy Williams	106 E. Lincolnway
X Add			Fourth Floor
			Cheyenne, WY 82001
Remove 2) Change	D	Nick LaMaina	106 E. Lincolnway
X Add			Fourth Floor
			Cheyenne, WY 82001
Remove 3) Change	CFOT	John Trohan	106 E. Lincolnway
X Add			Fourth Floor
Remove			Cheyenne, WY 82001
4) Change	CITO	Raymond Kiley	106 E. Lincolnway
X Add		_	Fourth Floor
Remove			Cheyenne, WY 82001
5) Change	CCO	Brandi Reynolds	106 E. Lincolnway
X Add			Fourth Floor
			Cheyenne, WY 82001
Remove	AML) Lauren Benjamin	106 E. Lincolnway
6) Change			Fourth Floor
Add			Cheyenne, WY 82001
Remove			

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Example:

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X Change	PT John	<u>Doe</u>	
X Remove	<u>V</u> <u>Mike</u>	<u>e Jones</u>	
X Add	SV Sally	y Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	BSAO	Lauren Benjamin	106 E. Lincolnway
X Add			Fourth Floor
			Cheyenne, WY 82001
Remove 2) Change	S	Lauren Benjamin	106 E. Lincolnway
Add			Fourth Floor
Y			Cheyenne, WY 82001
Remove 3) Change	PD	John Bartleman	8050 SW 10th Street
Add			Plantation, FL 33324
X Remove			
4) Change	CFT	Greg Vance	8050 SW 10th Street
			Plantation, FL 33324
Add			
Remove 5) Change	COD	Peter Korotkiy	8050 SW 10th Street
			Plantation, FL 33324
Add X			
Remove	GCAS	David Schubauer	8050 SW 10th Street
6) Change			Plantation, FL 33324
Add X			
Remove			

It amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Example:

Please note the officer/director title by the first letter of the office title:

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X Change	\underline{PT}	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add ,	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	S	Marc Stone	8050 SW 10th Street
Add			Plantation, FL 33324
X Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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4	onal sheets, if necessary)	(Be specific)			
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If an amend	ment provides for an e	<u>xchange, reclassifica</u>	tion, or cancellation	on of issued shares.	
	for imp <u>lementing the a</u>	<u>mendment if not coi</u>	ntained in the ame	idment itself:	
provisions	ipplicable, indicate N/A)				
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DocuSign Envelope ID: 5188BF2B-1AC3-405F-9690-523F028DA8D7 April 15, 2024 date this document was signed. April 15, 2024 Effective date if applicable: (no more than 90 days after amendment file date) 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. (CHECK ONE) Adoption of Amendment(s) The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required. ■ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval. ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s): "The number of votes east for the amendment(s) was/were sufficient for approval (voting group) 15 April 2024 Dated (B) a directors president or other officer - if directors or officers have not been

Nick LaMaina

appointed fiduciary by that fiduciary)

(Typed or printed name of person signing)

selected, by an incorporator - if in the hands of a receiver, trustee, or other court

Director

(Title of person signing)