## P21000034394

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| Special Instructions to Filing Offic | er:                |
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORPO          | DRATION: Hazout Group US                    | Inc.   |  |                      |
|------------------------|---|--|--|----------------------|
| DOCUMENT NUM           | 1BER: P21000034394                          |  |  |                      |
|                        | es of Amendment and fee are su              | bmitted for filing.  |  |                      |
| Please return all corr | respondence concerning this ma              | tter to the following:   |  |                      |
|                        | Cheryl Kaufinan                             |  |  |                      |
|                        |   | Name of Contact Perso  | n  |                      |
|                        | Cheryl Julien Kaufman, PA                   |  |  |                      |
|                        |   | Firm/ Company  |  |                      |
|                        | 2301 Sunset Dr.                             | , ,  |  |                      |
|                        |   | Address  |  |                      |
|                        | Miami Beach, FL 33140                       |  |  | _                    |
|                        |   | City/ State and Zip Coc  | le   |                      |
|                        | chervl@kaufmantitle.com                     |  |  |                      |
|                        | • "*  | sed for future annual repor  | t notification)  | 11<br>01<br>11<br>12 |
| For further informati  | on concerning this matter, pleas            | se call:   |  | <i>J•</i>            |
| Cheryl Kaufman         |   | 305<br>at (  | 854-0500<br>ode & Daytime Telephone Number   |                      |
| Name                   | of Contact Person                           | Area Co  | ode & Daytime Telephone Number   |                      |
| Enclosed is a check t  | for the following amount made               | payable to the Florida Dep   | partment of State:   |                      |
| ■ \$35 Filing Fee      | ☐\$43.75 Filing Fee & Certificate of Status | □\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |                      |
|                        | ailing Address<br>nendment Section          |  | Address<br>dment Section   |                      |
|                        | vision of Corporations                      |  | on of Corporations   |                      |
| Р. С                   | D. Box 6327                                 |  | Centre of Tallahassee  |                      |
| Ta                     | Hahassee, FL 32314                          | 2415   | N. Monroe Street, Suite 810  |                      |

Tallahassee, FL 32303

2025 APR 28 PM 1: 21

## Articles of Amendment to Articles of Incorporation of

| Hazout Group US Inc.   |   |
|--|---|
| (Name of Corporation as current)   | y filed with the Florida Dept, of State)                        |
| P21000034394   |   |
| (Document Number of  | f Corporation (if known)  |
| Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:  | Florida Profit Corporation adopts the following amendment(s) to |
| A. If amending name, enter the new name of the corporation:  |   |
| Black-Ridge Investment Holding Inc.  | The new   |
| name must be distinguishable and contain the word "corporation," "co" lnc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A." | company," or "incorporated" or the abbreviation "Corp.,"        |
| B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )  | 2025 A  |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  | PR 28 PM 1: 2   |
| D. If amending the registered agent and/or registered office adds new registered agent and/or the new registered office address  Name of New Registered Agent  |   |
|  |   |
| (Florida str   | cet address)  |
| New Registered Office Address:   | (City) (Zip Code)   |
| New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar s  | with and accept the obligations of the position.                |
| Signature of New R   | egistered Agent, if changing                                    |

Check if applicable

 $\Box$  The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

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)

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.

| Example: X Change          | <u>PT</u>     | John Doe     |           |   |  |                 |               |  |
|----------------------------|---------------|--------------|-----------|---|--|-----------------|---------------|--|
| X Remove                   | <u>V</u>      | Mike Jones   |           |   |  |                 |               |  |
| X Add                      | <u>sv</u>     | Sally Smith  |           |   |  |                 |               |  |
| Type of Action (Check One) | Title         | <u>Na</u>    | <u>me</u> |   |  | <u>Addres</u> s |               |  |
| 1) Change                  |               |              | •         |   |  |                 |               |  |
| Add                        |               |              |           |   |  |                 | _             |  |
| Remove                     |               |              |           |   |  |                 |               |  |
| 2) Change                  |               |              |           | _ |  |                 |               |  |
| Add                        |               |              |           |   |  |                 | <u>.</u>      |  |
| Remove 3 ) Change          |               | <del>_</del> |           |   | <u>.                                    </u> |                 |               |  |
| Add                        |               |              |           |   |  |                 |               |  |
| Remove                     |               |              |           |   |  |                 |               |  |
| 4) Change                  |               |              |           |   |  |                 |               |  |
| Add                        |               |              |           |   |  |                 |               |  |
| Remove                     |               |              |           |   |  |                 |               |  |
| 51 Change                  | <del></del> - |              |           |   | <u>.                                    </u> |                 | <del></del> - |  |
| Add                        |               |              |           |   |  |                 |               |  |
| Remove                     |               |              |           |   |  |                 |               |  |
| 6) Change                  |               |              |           |   |  |                 |               |  |
| Add                        |               |              |           |   |  |                 |               |  |
| Remove                     |               |              |           |   |  |                 |               |  |

| If amending or adding additional Ar (Attach additional sheets, if necessary). | . (Be specific)     |                  |                  |             |  |
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| If an amendment provides for an exc   | change, reclassific | ation, or cancel | lation of issued | shares,     |  |
| provisions for implementing the am  | nendment if not co  | ntained in the a | mendment itse    | <u>lf:</u>  |  |
| (if not applicable, indicate N/A)   |                     |                  |                  |             |  |
|   |                     |                  |                  |             |  |
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| Effective date <u>if applicable</u> :                                 |  |
|---|--|
|   | (no more than 90 days after amendment file date)   |
| Note: If the date inserted in this locument's effective date on the I | block does not meet the applicable statutory filing requirements, this date will not be listed as the Department of State's records.             |
| Adoption of Amendment(s)  | ( <u>CHECK ONE</u> )   |
| ■ The amendment(s) was/were action was not required.                  | dopted by the incorporators, or board of directors without shareholder action and shareholder  |
| ☐ The amendment(s) was/were ac<br>by the shareholders was/were:       | dopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.   |
|   | pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s): |
| "The number of votes ca:  | st for the amendment(s) was/were sufficient for approval   |
| by  | ,"   |
| , =:  | (voting group)   |
|   |  |
| Dated   | 1/21/2025  |
|   | 1/24/2025  |
| Signature(By a  | director, president or other officer – if directors or officers have not been  |
| Signature(By a select   | ted, by an incorporator - if in the hands of a receiver, trustee, or other court   |
| Signature(By a select   |  |
| Signature(By a select   | ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)  Low N. HAZOX                |
| Signature(By a select   | ted, by an incorporator - if in the hands of a receiver, trustee, or other court   |
| Signature(By a select   | ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)  Low N. HAZOX                |