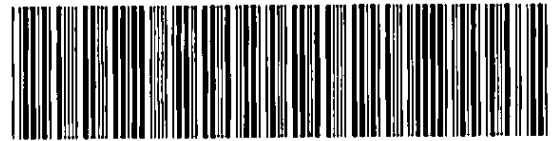


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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____


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STATE
FALLAHASSEE, FLORIDA

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195
REFERENCE : 952903 8279525
AUTHORIZATION : 
COST LIMIT : \$35.00

ORDER DATE : August 11, 2021
ORDER TIME : 9:36 AM
ORDER NO. : 952903-058
CUSTOMER NO: 8279525

CHANGE OF AGENT

NAME: BLACKROCK FINANCIAL
MANAGEMENT, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY

CONTACT PERSON: Alexxis Weiland

EXAMINER'S INITIALS: _____

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of DE _____ in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: BLACKROCK FINANCIAL MANAGEMENT, INC.
- 2. The principal office address: _____
55 East 52nd St New York, NY 10022
- 3. The mailing address (if different): _____
- 4. Date of incorporation/qualification: 11/18/2003 Document number: F03000005777
- 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

- 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Corporation Service Company
1201 Hays Street
Tallahassee P.O. Box NOT acceptable FL 32301

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Jill E. Cilmi Signature of an officer or director
Jill Cilmi, Vice President Printed or typed name and title

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Grace E. Kirby By: Signature of Registered Agent
08/12/2021 Date

If signing on behalf of an entity:
Grace E. Kirby, Asst. Vice President
Typed or Printed Name

*** FILING FEE: \$35.00 ***