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Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number: 110432003053 Phone

Fax Number

: (561)694-8107 : (561)694-1639

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

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## REGISTERED AGENT CHANGE MAN INVESTMENTS HOLDINGS INC.

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Corporate Filing Menu

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APR - 7 2020

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- 1

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

	r to change its registered office or regis	anized under the laws of the State of Delaware stered agent, or both, in the State of Florida.	
1. The name of t	he corporation: Man Investments Holdin	ngs Inc.	
	office address: 452 Fifth Avenue, 27th F		
New York, New			
3. The mailing a	ddress (if different):		
4. Date of incorp	oration/qualification: 08/22/2019	Document number: F19000003911	
	street address of the current registered tment of State: (If resigned, enter resign	agent and registered office on file with the ned)	
	Corporation Service Company		2020 A.
	1201 Hays Street		-
	Tallahassee, FL 32301		9-
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):		ent (if changed) and /or registered office	AH 9:5
	Corporate Creations Network Inc.		#
	801 US Highway 1		
	P.O. 8	ox NOT acceptable	
	North Palm Beach, FL 33408		
_		et address of the business office of its register ed by its board of directors or by an officer so notified in writing of the change.	
		Solomon Kuckelman	
hereby accept further agree to f my duties, and locument is bei	the appointment as registered agent a the appointment as registered agent a to comply with the provisions of all sta I I am familiar with and accept the ob ng filed merely to reflect a change in t been notified in writing of this chang	itules relative to the proper and complete pe pligation of my position as registered agent. The registered office address. I hereby confin	rformance Or, if this m that the
orporquon nas:		April 6, 2020	
	ature of Registered Agent	Date	

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (04/13)