| Current Principal Place of Business: | | | | 51545000 | |
|--------------------------------------|--|--------------------------|--|------------|--|
| 539 PARSON V | VAY | | | | |
| DEERFIELD BE | ACH, FL 33442 | | | | |
| Current Mai | ling Address: | | | | |
| 539 PARSO DEERFIELD | NWAY BEACH, FL 33442 US | | | | |
| FEI Number | : 88-1382221 | | Certificate of Status Desired: No | | |
| Name and A | ddress of Current Registered Agent: | | | | |
| 1216 E ATLANT SUITE 03 | AILY SOLUTIONS LLC FIC BLVD ACH, FL 33060 US | | | | |
| The above named | l entity submits this statement for the purpose of changing its re | gistered office or regis | tered agent, or both, in the State of Floric | la. | |
| SIGNATURE: FERNANDA MACHADO | | | | 04/25/2023 | |
| | Electronic Signature of Registered Agent | | | Date | |
| Authorized | Person(s) Detail : | | | | |
| Title | MGR | Title | MGR | | |
| Name | LANDIM GOMES, LETICIA M | Name | ANTUNES DE SOUZA, LUCAS PA | AES | |
| Address | 539 PARSON WAY | Address | 539 PARSON WAY | | |
| City-State-Zip: | DEERFIELD BEACH FL 33442 | City-State-Zip: | DEERFIELD BEACH FL 33442 | | |
| | | | | | |
| | | | | | |

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

| SIGNATURE: LETICIA M LANDIM GOMES MGR 04/25/202 | 23 |
|---|----|
|---|----|

DOCUMENT# L22000100108

Entity Name: PAES'S COMPANY LLC

Date

Electronic Signature of Signing Authorized Person(s) Detail

FILED Apr 25, 2023 Secretary of State 5407919490CC