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Office Use Only



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RA & RO Change

RECIEIVED FILED MONOR

A. RAMSEY AUG & 2074 * CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO.	: 12000000195		
REFERENCE	: 551006 7424433		
AUTHORIZATION	Open de la		
COST LIMIT	: \$ 35.00		
ORDER DATE : July 15, 2024			
ORDER TIME : 9:31 AM			
ORDER NO. : 551006-211			
CUSTOMER NO: 7424433			
CHANGE OF AGENT			
NAME: DPWN HOLDINGS	(IICA) INC		
MAND. DIWN HOLDINGS	(ODA) INC.		
PLEASE RETURN THE FOLLOWING AS	PROOF OF FILING:		
CERTIFIED COPY XX PLAIN STAMPED COPY			
CONTACT PERSON: Amanda Miller			

EXAMINER'S INITIALS:

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

statement of char	provisions of sections 607.0502, 617 nge is submitted for a corporation of to change its registered office or r	organized under the law	vs of the State of
1. The name of t	he corporation: DPWN HOLDINGS	G (USA) INC.	
2. The principal	office address: 1210 South Pine Is	land Road, 1st Floor, t	egal Dept., Plantation, FL 33324
3. The mailing a	ddress (if different):		
4. Date of incorp	oration/qualification: 05/13/2009	Document r	number:F09000001943
5. The name and Florida Depar	street address of the current registe tment of State: (If resigned, enter re	ered agent and registere esigned)	
	C T Corporation System		
	1200 South Pine Island Road		33324
	Plantation	FL_	33324
6. The name and (if changed):	street address of the new registered	i agent (if changed) and	I /or registered office
	Corporation Service Company		
P O. Box NOT acceptable Tallahassee FL 32301			
The street addre	ss of its registered office and the s be identical.	treet address of the bu	siness office of its registered agent,
Such change was authorized by the	s authorized by resolution duly ad e board, or the corporation has be	opted by its board of c on notified in writing o	lirectors or by an officer so of the change.
/s/ Kevin Co	oles	Kevin Coles, V	
I hereby accept I further agree to of my duties, an document is beil corporation has	t of an officer or director the appointment as registered age o comply with the provisions of al d I am familiar with and accept th ng filed merely to reflect a change been notified in writing of this ch n, Service Company	nt and agree to act in l statutes relative to th e obligation of my pos in the registered office ange.	ed or typed name and title this capacity. e proper and complete performance ition as registered agent. Or, if this e address, I hereby confirm that the
By:	nature of Registered Agent	08/07/2024	Date
ū	half of an entity:		
	, Asst. Vice President		

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