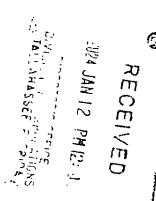
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(BU	isiness Entity Name)			
(Do	cument Number)			
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Account#: 120000000088
If there are any issues please contact Patrice at 850-202-9071

Date:	01/11/2024	
Name:	Patrice Rush	-
Reference #:	2232748	_
Entity Name:	PHAROS SYSTEMS	S INTERNATIONAL, INC.
Article	es of Incorporation/Authorization	to Transact Business
Amen	dment	
✓ Change	ge of Agent	
☐ Reins	tatement	
☐ Conve	ersion	
☐ Merge	er C	
☐ Dissol	lution/Withdrawal	
☐ Fictition	ous Name	
Other		
Authorized A	mount:\$35.00	

F: +852.2682.9790



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Account#: 120000000088 If there are any issues please contact Patrice at 850-202-9071

Date: 0	<u> </u>	
Name:	Patrice Rush	_
Reference #:_	2232748	
Entity Name:_	PHAROS SYSTEM	S INTERNATIONAL, INC.
_	of Incorporation/Authorizatio	n to Transact Business
Amendo		
✓ Change	_	
Reinsta		
Conver	sion	
☐ Merger		
☐ Dissolu	tion/Withdrawal	
☐ Fictitiou	is Name	
Other_		
Authorized Am	nount: \$35.00	

F: 800.944.6607

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

statement of cha	nge is submitted for a corporatio	617,0502, 607,1508, or 617,1508, Fl on organized under the laws of the Sta or registered agent, or both, in the Sta	ne of Delaware
1. The name of t	DHADA	OS SYSTEMS INTERN	
	office address: No Change		
3. The mailing a	ddress (if different):		
4. Date of incorp	oration/qualification: Octobe	r 28, 2011 Document number:	F11000004364
	street address of the current reg tment of State: (If resigned, ente	istered agent and registered office on resigned)	file with the
	Corporation	Service Company	
	1201	Hays Street	
	Tallahasse	e, FL 32301-2525	
6. The name and (if changed):	street address of the new registe	ered agent (if changed) and /or registe	Sered office JAN II
	115 North Calhoui	Box NOT acceptable	AHIO: 02
The street addre	ss of its registered office and th	e street address of the business offic	e of its registered agent,
Such change wa	s authorized by resolution duly	adopted by its board of directors or been notified in writing of the chang	by an officer so
/s/ Matthew P Bryant Matthew P Bryant Signature of an officer or director Printed or typed name and title			
I further agrée t performance of agent. Or, if thi	o comply with the provisions of my duties, and I am familiar wit s document is being filed merel	gent and agree to act in this capacit all statutes relative to the proper ar th and accept the obligation of my po to reflect a change in the registere of this change.	id complete osition as revistered
/s/ Tim Mayv		1/10/2024	
_	ature of Registered Agent nalf of an entity:	Date	

Tim Mayville, Assistant Secretary

Typed or Printed Name

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