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JUL 12 2021 I ALBRITTON CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 898590 7391888

AUTHORIZATION :

ORDER DATE : July 9, 2021

ORDER TIME : 10:46 AM

ORDER NO. : 898590-015

CUSTOMER NO: 7391888

CHANGE OF AGENT

NAME: LEND STREET FINANCIAL, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_ CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Eyliena Baker

EXAMINER'S INITIALS:

## **COVER LETTER**

	mendment Section vision of Corporations	
SUBJECT Name of Co	LEND STREET FINANCIAL, INC.	
DOCUME	ENT NUMBER: F13000000919	
The enclose	sed Statement of Change of Registered Office/Age	ent and fee are submitted for filing.
Please retur	rn all correspondence concerning this matter to th	e following:
Name of Co	ontact Person	<del></del>
Firm/Comp	pany	
Address		<del></del>
City/State a	and Zip Code	
E-mail add	dress: (to be used for future annual report noti	fication)
For further	information concerning this matter, please call:	
	at (	Area Code & Daytime Telephone Number
	Name of Contact Person	Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

**Street Address:** Amendment Section Division of Corporations

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

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

statement of cha	provisions of sections 607.0502, 617.6 inge is submitted for a corporation org r to change its registered office or reg	ganized under the law	ws of the State of $\_$	Delaware	
1. The name of	the corporation: LEND STREET FINAN	NCIAL, INC.	·		
	office address: 610 16TH STREET, S		, CA 94612		
3. The mailing a	nddress (if different):				
4. Date of incorporation/qualification: 02/27/2013 Document number: F13000000919					
5. The name and Florida Depart	I street address of the current registered timent of State: (If resigned, enter resigned)	d agent and registere gned)	ed office on file wi	th the	
	INCORP SERVICES, INC.				
	17888 67TH COURT NORTH	-		7021 JUL -9	
	LOXAHATCHEE	FL	33470		
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office.  Corporation Service Company				
	1201 Hays Street			. +	
	P.O I Tallahassee	Box NOT acceptable FL	32301		
The street addre	ss of its registered office and the stre be identical.		_	registered agent,	
Such change wa authorized by th	s authorized by resolution duly adopted board agr. the corporation has been	ted by its board of d notified in writing o	lirectors or by an of the change.	officer so	
	1 Ui-	Rosema Nemor	in	President & CEO	
I hereby accept I further agree t of my duties, an document is beit corporation has Corporatior By:	the appointment as registered agent of comply with the provisions of all stand accept the one filled merely to reflect a change in been notified in writing of this change in Service Company		this capacity.  this capacity.  e proper and compition as registered  address, Thereby  Date		
If signing on bel	nalf of an entity:				
Ty	ped or Printed Name				

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