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(((H24000109932 3)))



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REGISTERED AGENT CHANGE ACCESS NEWCO, INC.

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COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: ACCESS NEWCO, INC. Name of Corporation DOCUMENT NUMBER: F14000005269 The enclosed Statement of Change of Registered Office/Agent and fce are submitted for filing. Please return all correspondence concerning this matter to the following: Alejandro Moreno Name of Contact Person ACCESS NEWCO, INC. Firm/Company 40 W 57th St, 28th Floor Address New York, NY 10019 City/State and Zip Code support@singlefile.io E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: SingleFile Technologies ₁391-9869

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

Name of Contact Person

Street Address:
Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810

Area Code & Daytime Telephone Number

2413 N. Monioe Street, State 610

Tallahassee, FL 32303

CR2E045 (04/13)

To:

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

	provisions of sections 607.0502, 6 ange is submitted for a corporation				
in orde	er to change its registered office of	registered	agent, or both, in the State of Flo	rida.	
1. The name of	the corporation: ACCESS NEV	VCO, INC	· · · · · · · · · · · · · · · · · · ·	·	
2. The principal	office address: 40 W 57th St, 2	28th Floor	New York, NY 10019		
3. The mailing a	address (if different):	·			
4. Date of incor	poration/qualification: 12/12/20	14	Document number: F140000	05269	
	d street address of the current regis rtment of State: (If resigned, enter		and registered office on file with	the	
	CORPORATION SERV	VICE CO	OMPANY	_	
	1201 HAYS STREET		2	FILE 2024 MAR 25 SECRETARY	
	TALLAHASSEE, FL 32	2301		图 第二	
6. The name and (if changed):	TALLAHASSEE, FL 32 d street address of the new register Registered Agents Inc	ed agent (if	changed) and /or registered office	FILED AR 25 PH 8	
	Registered Agents Inc			: 29	
	7901 4th St N STE 300)			
	St. Petersburg FL 3370	P.O. Box NOT) 2	「 seceptable		
The street address changed will	ess of its registered office and the be identical.	street addr	ess of the business office of its r	registered agent,	
Such change wanthorized by the	as authorized by resolution duly a he board, or the corporation has b	adopted by seen notified	its board of directors or by an of d in writing of the change.	ficer so	
/s/ Alejand	Iro Moreno ure of an officer or director	<u>A</u>	Alejandro Moreno		
I hereby accept I further agree of my duties, ar Jocument is bel	ire of an officer or director the appointment as registered as to comply with the provisions of a nd I am familiar with and accept to ing filed merely to reflect a chang s been notified in writing of this c	all statutes the obligati se in the res	Printed or typed name and interee to act in this capacity, relative to the proper and complete on of my position as registered agistered office address, I hereby	ete performance gent. Or, if this confirm that the	
David Brents		0:	3/22/2024		
	mature of Registered Agent	- 	Date		
	chalf of an entity:				
David Rob	yped or Printed Name	-			

* * * 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)