F1500000595

(Requestor's Name)
(Address)
(Address)
, ,
(City/State/Zip/Phone #)
(Otty/State/2/p/Filone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
,
Certified Copies Certificates of Status
Certified Copies Certificates of Glatus
Special Instructions to Filing Officer:





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11/04/22--01017--007 **35.00

D22 HOV - L AM 8: 0

0/1/19/2023

PROFIT CORPORATION

APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607.1504, F.S.)

SECTION 1 (1-3 MUST BE COMPLETED)

2022 HOV -4 AM 8: 02

SECRUL IN OF STATE

F1500000	00595	TALLAHASSEE, FL
	(Document number of corporation (if known)	
Five23 Group Inc		
•	oration as it appears on the records of the Departi	ment of State)
Delaware	3. 02/13/2015	
(Incorporated under laws	s of) (Date authori	ized to do business in Florida)
(年7 CO	SECTION II OMPLETE ONLY THE APPLICABLE CHAS	NGES)
. If the amendment changes the name of the co- incorporation? July 12, 2022	orporation, when was the change effected under t	the laws of its jurisdiction of
Lumenor Consulting Group Inc (Name of corporation after the amendment, a not contained in new name of the corporation)	adding suffix "corporation," "company," or "incon)	orporated," or appropriate abbreviation, i
(If new name is unavailable in Florida, enter	alternate corporate name adopted for the purpose	e of transacting business in Florida)
6. If the amendment changes the period of	duration, indicate new period of duration.	
Perpetual	1	
	(New duration)	
7. If the amendment changes the jurisdiction	on of incorporation, indicate new jurisdiction.	
_	(New jurisdiction)	
If amending the registered agent and/or renew registered agent and/or the new regis	egistered office address in Florida, enter the natered office address:	name of the
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if cha	,,	frak zama
Thereby accept the appointment as registere	ed agent. I am familiar with and accept the oblig	gations of the position.
Signature of New Register	red Agent, if changing	

: . <u>Fitle/ Capacity</u>	<u>Name</u>	Address	Type of Action
			Remove
			Remove
			Q Add
			Remove
· <u> </u>			Add
			□Add
			Remove
Attached is a certific of the application to under the laws of wh	rate or document of similar in the Department of State, by the lich it is incorporated.	import, evidencing the amendment, authentic ne Secretary of State or other official having o	ated not more than 90 days prior to deli- ustody of corporate records in the jurisdic
-	My No	of a director, president or other officer - if in to or other court appointed fiduciary, by that fidi	the hands of
Marsha L	a receiver of Secres of or printed name of person s		cof person signing)

FILING FEE \$35.00

Page 1



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT

COPY OF THE CERTIFICATE OF AMENDMENT OF "FIVE23 GROUP, INC",

CHANGING ITS NAME FROM "FIVE23 GROUP, INC" TO "LUMENOR

CONSULTING GROUP, INC", FILED IN THIS OFFICE ON THE TWELFTH DAY

OF JULY, A.D. 2022, AT 9:13 O'CLOCK A.M.



Authentication: 203906699 Date: 07-13-22

4456041 8100 SR# 20222960964

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "LUMENOR CONSULTING GROUP, INC" IS DULY

INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS

OF THIS OFFICE SHOW, AS OF THE TWENTY-FOURTH DAY OF OCTOBER, A.D.

2022.

Authentication: 204684992

Date: 10-24-22