F15000002786

(Requestor's Name) (Address) (Address)	600393788846		
(City/State/Zip/Phone #)	RAGRO Charge		
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	09/03/2201002007 *140.00 SEP -8 AT LED		
Special Instructions to Filing Officer:	2022 SEP -8 PM 5:06		
	A. RAMSEY SEP - 9 2022		

Advanced Incorporating Service

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1317 California Street P.O. Box 20396 Tallahassee, FL 32316 Phone: 850-222-CORP Fax: 850-575-2724 Email: wlopez@aisincfl.com Website: www.aisincfl.com

Operation Pathuray Inc
FOR OFFICE USE ONLY
PICK ONE:
CERTIFIED COPYPHOTOCOPYC.U.S.
FILING:
CORPORATIONLLCLIMITED PARTNERSHIPGENERAL PARTNERSHIP
FICTITIOUS NAMESERVICEMARK/TRADEMARKAMENDMENT
FOREIGN QUALIFICATIONJUDGMENT LIEN OTHER_22A Change
RETRIEVAL:
GOOD STANDING CERT/C.U.SCERTIFIED COPYPHOTOCOPY
APOSTILLE/NOTARY CERTIFICATION REQUEST:
Country
Amount of Documents
DATE 9/1/22 TIME
Notes:

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of D.C. in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of t	the corporation: OPERATION PATHWAYS, INC		
2. The principal	office address: 122 East 42nd Street, Suite #4900, New York, NY 10168		
-	ddress (if different):		
5. The name and	i street address of the current registered agent and registered office on file with the timent of State: (If resigned, enter resigned)		
	COGENCY GLOBAL INC.		
	115 NORTH CALHOUN ST. SUITE 4		
	Tallahassee, FL 32301	~2	
6. The name and (if changed):	i street address of the new registered agent (if changed) and /or registered office	2022 SEP	T.
	Universal Registered Agents, Inc.		F
	1317 California Street	H	C
	P.O. Box NOT acceptable Tallahassee, FL 32304	1. 18	ı

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Signature of an officer or director /5/

Thomas Vaceuro, Secretary Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address. I hereby confirm that the corporation has been notified in writing of this change.

Signature Registered Agent

09/01/2022

Date

If signing on bchalf of an entity:

Ashton Villegas, Secretary

Typed 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)