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Division of Corporations

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From:

Account Name : INCORP SERVICES INC

Account Number : 120120000007 : (702)866-2500

Fax Number : (702)900-2290

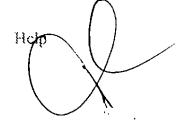
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COVER LETTER 'n TO: Amendment Section Division of Corporations SUBJECT: Homelister Inc. Name of Corporation F15000002852 DOCUMENT NUMBER: The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Wendy Hefley Name of Contact Person InCorp Services, Inc. Firm/Company 3773 Howard Hughes Pkwy. · Suite 500S Address Las Vegas, NV 89169-6014 City/State and Zip Code managedreports@incorp.com E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Wendy Hefley on behalf of InCorp Services, Inc. $_{
m at}$ 800-246-2677

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	the provisions of sections 607.0502, (change is submitted for a corporatio	n organize	d under the laws of the State o	Delaware	
	rder to change its registered office o	-	d agent, or both, in the State o	f Flo ri da.	
	of the corporation: Homelister Inc.			***************************************	
2. The princi	pal office address: 26401 Calle R				
3. The mailir	ng address (if different):				
	corporation/qualification: 06/30				
	and street address of the current regi-		at and registered office on file	with the	
	UNITED STATES CORPOR	ATION A	GENTS, INC.		
	476 RIVERSIDE AVE.			2023	
	JACKSONVILLE EL 32202			- 子	
6. The name (if changed	and street address of the new register d):	red agent (i	f changed) and /or registered (
	InCorp Services, Inc.				
	3458 Lakeshore Drive			= =	
P.O. Box NOT acceptable					
	Tallahassee, FL 32312				
The street ad as changed w	dress of its registered office and the vill be identical.	street add	iress of the business office of	its registered agent,	
Such change authorized by	was authorized by resolution duly a vihe hoard, or the corporation has b	adopted by seen notific	its board of directors or by a ed in writing of the change.	n officer so	
		J	ennifer Stein, Secretary		
• • • • • • • • • • • • • • • • • • • •	istare of an officer or director		Pointed or typed name and		
I hereby acce I further agre of my duties, document is corporation)	ept the appointment as registered as see to comply with the provisions of a and I am familiar with and accept t being filed merely to reflect a chang has been notified in writing of this c	gent and ag all statutes the obligat ge in the re shange.	gree to act in this capacity, relative to the proper and co ion of my position as register gistered office address, I her	mplete performance ed agent. Or, if this eby confirm that the	
	en e		03/08/2023		
	Signatuse of Registered Agent		Date	***************************************	
	behalf of an entity:				
Louise Breyter	abach on behalf of InCorp Services, inc.				
***********************	Typed or Printed Name	**			