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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 456077 825347**2**

AUTHORIZATION :

COST LIMIT :

ORDER DATE: May 2, 2024

ORDER TIME : 1:57 PM

ORDER NO. : 456077-010

CUSTOMER NO: 8253472

CHANGE OF AGENT

NAME: ALIMCO FINANCIAL

CORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Shauna Godbolt

EXAMINER'S INITIALS:

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 PELAWARE in order to change its registered office or registered agent, or both, in the State of Florida. 1. The name of the corporation: ALIMCO FINANCIAL CORPORATION 2. The principal office address: 2336 SE OCEAN BLVD #400 STUART, FL 34996 3. The mailing address (if different): Document number: F15000005547 4. Date of incorporation/qualification: 12/15/2015 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned) C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD **PLANTATION** FĻ 33324 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Corporation Service Company 1201 Hays Street P.O. Box NOT acceptable Tallahassee FL 32301 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. J. Christopher Dougherty, CEO /s/ J. Christopher Dougherty Printed or typed name and lifle Signature of an officer or director 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. Corporation Service Company /s/ Grace E. Kirby 05/02/2024 By: Signature of Registered Agent Date If signing on behalf of an entity: Grace E. Kirby, Asst Vice President

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, FIJ32314 CR2E045 (04/13) CSC 456077-10