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(Re	equestor's Name)	
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Account#: I20000000088

Date: July 30, 2018	Account#. 12000000000		
Name: KEN HOWELL			
Reference #:C023289			
Entity Name: MATTHEWS RETAIL GR	OUP, INC.		
Articles of Incorporation/Authorization to Tra	insact Business		
Amendment			
☑ Change of Agent			
Reinstatement	ð		
Conversion	ال		
Merger	ယ ၁		
☐ Dissolution/Withdrawal	· · · · · · · · · · · · · · · · · · ·		
☐ Fictitous Name			
Other			
Authorized Amount: \$35.00	-		
Signature:			

+1.212.947.7200

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

statement of cha	nge is submitted for a cor	poration organized	07.1508, or 617.1508, Flor I under the laws of the State I agent, or both, in the State	of Califo	this ernia	
1. The name of t	he corporation:	MATTHE	WS RETAIL GRO	OUP, INC	C	
• •	office address:	JITE 150	EL SEGUNDO	CA	90245	_
_	ddress (if different):	JITE 150	EL SEGUNDO	CA	90245	_
4. Date of incom	poration/qualification:	May 16, 2016	Document number:	F160000	02287	
	I street address of the curr tment of State: (If resigne		t and registered office on fi	le with the		
	СТС	corporation	System			
•	1200 Sc	outh Pine Is	land Road	75	2010	
	Plat	ntation, FL	33324	스 (A)	SECRETATION OF THE SECRETARY SECRETA	-
6. The name and (if changed):	l street address of the new	registered agent (i	f changed) and /or registere	All ASSE	:° ≥ 1	
	COGENCY G	LOBAL INC)	\sim	; co (
	115 North Cal	houn St., S			T 🚜	
	Tallahassee, I	FL 32301				
The street addre	ess of its registered office be identical.	and the street add	ress of the business office	of its register	red agent,	
Such change was authorized by th	as authorized by resolutione board, or the corporation	n duly adopted by on has been notifie	its board of directors or by ed in writing of the change.	an officer so	>	
Characterist Say			Radoslav Zlatkov	CFO		
I hereby accept I further agree to performance of	to comply with the provis my duties, and I am fami	ions of all statutes liar with and acce	Printed or typed name a gree to act in this capacity, relative to the proper and pt the obligation of my pos	complete ition as regis	tered	
hereby confirm	that the corporation has	been notified in wi	-1/2	ojjice adares	S, I	
Sign	nature of Registered Agent		//27/2018 Date			
If cianing on he	half of an entity:					

If signing on behalf of an entity:

Sean Honan, Assistant Secretary

Typed or Printed Name

* * * FILING FEE: \$35.00 * * *