Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H240002739193)))

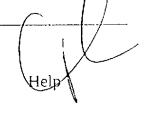


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To:	Division of Corporations			
	Fax Number : (850)617-63	380		
From:				,
	Account Name : REGISTERED		INC.	
	Account Number : I20090000081			
	Phone : (307)200-28 Fax Number : (813)436-52			
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Electronic Filing Menu

Corporate Filing Menu



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

statement of cha	nge is submitted for a corporation	617.0502, 607.1508, or 617.1508, Florida State on organized under the laws of the State of Delay	ware			
		or registered agent, or both, in the State of Flori	da.			
1. The name of	he corporation: Homestuck, Inc.					
2. The principal	office address:					
3. The mailing a	ddress (if different):					
4. Date of incorp	Date of incorporation/qualification: 03/17/2017 Document number: F17000001296					
	I street address of the current regitment of State: (If resigned, ente	istered agent and registered office on file with the resigned)	ne			
	DOMINGUEZ, CYNTHIA					
	2830 S. Hulen St. #801					
	Fort Worth, FL 76109		2024 £UG			
6. The name and (if changed):	I street address of the new registe	cred agent (if changed) and /or registered office	::315			
	Northwest Registered Agent LLC		Ē			
	7901 4th St N STE 300		. 			
	St. Petersburg FL 33702	P.O. Box NOT acceptable	80			
The street addre	ess of its registered office and the identical.	te street address of the business office of its reg	gistered agent,			
Such change wa authorized by th	is authorized by resolution duly the board, or the corporation has	adopted by its board of directors or by an office been notified in writing of the change.	cer so			
Cynthia Do	minguez e a so ancel or ancelor	Cynthia Dominguez - T				
		Printed or typed name and one proper and agree to act in this capacity all statutes relative to the proper and complet the obligation of my position as registered aging in the registered office address. I hereby calchange.	e performance ent. 'Or, if this onfirm that the			
7-N-		08/15/2024				
Sigi	nature of Registered Agent	Date				
If signing on be	half of an entity:					
Taylor Newman		_				
Ту	ped or Printed Name					

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