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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: 120000000088

Date:	01/25/2019	
	Merritt Walker	
	C023963	
	e: OPE	NDOOR LABS INC.
Articl	les of Incorporation/Authori	zation to Transact Business
Ame	ndment	
✓ Char	nge of Agent	
Rein:	statement	
☐ Conv	version	
☐ Merg	jer	
Disso	olution/Withdrawal	
☐ Fictit	ious Name	
☐ Othe	r	
Authorized A	Amount: \$35	
Signature:	iww	

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

statement of chai	provisions of sections 607.0. nge is submitted for a corpo r to change its registered of	ration organize	d under the laws	of the State o	Delaware	 -			
·	in order to change its registered office or registered agent, or both, in the State of Florida. OPENDOOR LABS INC.								
	The principal office address:								
z. The principal	no changes	-							
3. The mailing a	ddress (if different):								
4. Date of incorp	poration/qualification:	09/19/2017	Document nu	mber:	F1700000419	3			
	street address of the curren tment of State: (If resigned,			office on file	with the				
	CORF	ORATION SE	RVICE COMPAN	NY	~				
	1201 HAYS ST	TREET, TALL	NHASSEE, FL 32	2301-2525	2019 JAN SECKLI JALLA	77			
6. The name and (if changed):	street address of the new re	egistered agent (if changed) and /	or registered	28 AM				
		COGENCY GI	OBAL INC.		- 14 STATE - 44 :6				
	115 No	rth Calhoun St	reet, Suite 4						
		P.O. Box NOT acc	eptable		_				
	Tallahasse	<u>e</u>	Florida	32301	_				
The street addre as changed will	ss of its registered office and be identical.	nd the street ad	dress of the busir	ness office of	its registered ag	gent,			
Such change wa authorized by th	s authorized by resolution of board, or the corporation	duly adopted by has been notifi	tits board of dire ed in writing of t	ectors or by a the change.	n officer so				
	son Child		Jason Chi	<u> </u>	CFO	_			
I hereby accept I further agree to performance of agent. Or. if thi	the of an officer or director the appointment as register to comply with the provision my duties, and I am familia s document is being filed n that the corporation has be	ns of all statute or with and acc overely to reflect	gree to act in thi s relative to the p ept the obligation a change in the	proper and co n of my position registered off	omplete on as registerea	•			
/S/ Tim f	Mayville		Ja	nuary 25, 201	19				
Sign	nature of Registered Agent			Date	· · · · · · · · · · · · · · · · · · ·	•			
If signing on bel	half of an entity:								
Tim Mayville	, Assistant Secretary								
Ту	ped or Printed Name								

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