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Division of Corporations



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : COMPUTERSHARE Account Number: 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: REGISTERED AGENT CHANGE PIERRY, INC. Certificate of Status Certified Copy 0 Page Count 02 Estimated Charge \$35.00 J. HORNE $G_{\mathcal{G}}$ JUN - 2 2023

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Help

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

statement of ch	nange is submitted for a corporati	, 617.0502, 607.1508, or 617.1508, Florida Su ion organized under the laws of the State of or registered agent, or both, in the State of Flo	
L. The name of	f the corporation: PIERRY, INC.		
		Suite 450, Costa Mesa, CA 92626	
3. The mailing	address (if different): 175 Greenv	wich St., 29th Floor New York, NY 10007	
4. Date of inco	rporation/qualification: 02/08/201	Document number: F18000000	658
5. The name ar		gistered agent and registered office on file with	
	CORPORATION SERVICE CO	MPANY	
	1201 HAYS STREET		
	TALLAHASSEE, FL 32301-252	25	
6. The name ar (if changed):		ered agent (if changed) and /or registered offic	ce
	Corporate Creations Network Inc	ε,	·~-i
	801 US Highway I		2023 SEC
	North Palm Beach, FL 33408	P.O. Box NOT acceptable	
The street addras changed will	ress of its registered office and the identical.	he street address of the business office of its	registered agent,
Such change wanthorized by	vas authorized by resolution duly the board, or the corporation has	y adopted by its board of directors or by an o been notified in writing of the change.	fficer so $\frac{10}{50}$
	la Edwards	Tasha Edwards, Attorney-in-Fact	Ø
I hereby accep I further agree of my duties, a document is be	r to comply with the provisions o and I am familiar with and accep	Printed or typed name and title agent and agree to act in this capacity, if all statutes relative to the proper and compit the obligation of my position as registered in the registered office address, I hereby change.	lete performance agent. Or. if this
Tasi	ka Cdwards gnature of Registered Agent	06/01/2023	
		Date	
If signing on b	ehalf of an entity:		
	, Special Secretary	<u></u>	
	Typed or Printed Name		

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