F20000003713

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Cı	ty/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(Bu	usiness Entity Name)	
(Do	ocument Number)	
Certified Copies	Certificates o	f Status
Special Instructions to Filin	ng Officer.	

Office Use Only



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S. CHATHAM OCI 23 2023



CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195 REFERENCE : 080021 5050197 AUTHORIZATION : COST LIMIT : ORDER DATE: October 19, 2023 ORDER TIME : 10:13 AM ORDER NO. : 080021-023 CUSTOMER NO: 5050197 CHANGE OF AGENT NAME: APEX CLEARING CORPORATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY
XX PLAIN STAMPED COPY

EXAMINER'S INITIALS:

CONTACT PERSON: Alexxis Weiland-sorenson

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

statement of change is submitted for a corporation organ in order to change its registered office or register.	ized under the laws of the State of New Yo	
The name of the corporation: APEX CLEARING COR	,	
The name of the corporation: The principal office address: 4522 W. Village Drive, U.	nit 1125, Tampa, FL 33624	
3. The mailing address (if different):		
4. Date of incorporation/qualification: 06/18/2020	Document number: F20000002713	
 The name and street address of the current registered at Florida Department of State: (If resigned, enter resigne 		E. 1 23
Jordan M. Finley		
4522 W. Village Drive, Unit 1125		PH
Tampa	FL 33624	1:58
6. The name and street address of the new registered ager (if changed): Corporation Service Company	at (if changed) and /or registered office	
1201 Hays Street		
	NOT acceptable	
Tallahassee	FL 32301	
The street address of its registered office and the street as changed will be identical.	address of the business office of its register	ed agent,
Such change was authorized by resolution duly adopted authorized by the board, or the corporation has been not	by its board of directors or by an officer so	0
Xie & Cone	Jill Cilmi, Vice President	
Signature of an officer or director	Printed or typed name and little	
I hereby accept the appointment as registered agent and I further agree to comply with the provisions of all state of my duties, and I am familiar with and accept the oblidecument is being filed merely to reflect a change in the corporation has been notified in writing of this change. Corporation Service Company	d agree to act in this capacity. ites relative to the proper and complete per gation of my position as registered agent. e registered office address, I hereby confirm	rformance Or, if this n that the
By: Cen M Leil	10/24/2023	
Signature of Registered Agent	Date	
If signing on behalf of an entity:		
Ami M. Casper, Asst. Vice President		
Typed or Printed Name *** FILING FE	E: \$35.00 * * *	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (04/13)