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CLAS Information Services 2020 Hurley Way, Suite #350 Sacramento CA 95825 Tel: (800) 447-6237

Job Number: 418201-6671

Date: 8/9/2021

Name: MPL BRANDS NV INC.

Request For: Florida TYPE OF FILING: Change of Agent

Special Instructions:

Please file the attached upon receipt. We have enclosed check #95494 in the amount of \$35.00. Please call with any questions. Thank you in advance for your assistance.

Sincerely,

Judy Culver

Florida Department of State Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

1. The name of the corporation: MPL BRANDS NV INC.

2. The principal office address: 3960 Howard Hughes Parkway, Suite 500-6001

LAS VEGAS, NV 89169

3. The mailing address (if different): PO Box 3617, Paso Robles, CA 93447

- 4. Date of incorporation/qualification: 06/26/2020 Document number: F20000002951
- 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

REGISTERED AGENTS INC. 7901 4TH ST N, STE 300

ST. PETERSBURG, FL 33702

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

NRAI SERVICES, INC.

1200 SOUTH PINE ISLAND ROAD

P.O. Box_NOT acceptable

PLANTATION, FL 33324

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

cer or director

MICHAEL PATANE, PRESIDENT

Printed or typed name and title

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I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address. I hereby confirm that the corporation has been notified in writing of this change.

Signature of Be stered Agent

If signing on behalf of an entity:

Christopher Cheung, Assistant Secretary

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 (r2e045 (04/13)