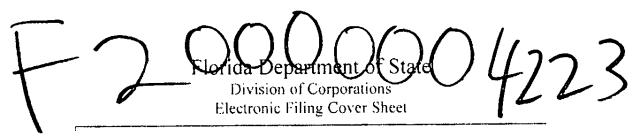
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From: Vcorp Services, LLC Page 1 of 2



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To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : VCORP SERVICES, LLC

Account Number : 120080000067

Phone : (845)425-0077 Fax Number : (845)818-3588

Fax Number : (845)818-3588 annual report mailings. Enter only one email address please. **

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AH 11: 47

REGISTERED AGENT CHANGE CAMDEN MEDIA INC.

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To: FL DIVISION OF CORPORATIONS

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, mge is submitted for a corporation organized under th r to change its registered office or registered agent, o	ne laws of the State of [Delaware		_
	he corporation: CAMDEN MEDIA INC.				
2. The principal	office address: 701 BRICKELL AVE STE 1550. MIAM	H, FL 33131			_
3. The mailing a	ddress (if different):				
4. Date of incorp	poration/qualification: 09/29/2020 Docum	nent number: F200000	04223		
	I street address of the current registered agent and registered of State: (If resigned, enterresigned)	istered office on file w	ith the		
	HESLEY, GARRETT		_		
	701 BRICKELL AVE STE 1550		_		
	MIAMI, FL 33131		2 (4	202	
6. The name and (ifchanged):	d street address of the new registered agent (if changed	i) and /or registered of	licer	2022 JUL -7	ı
	Veorp Services, LLC		ی بود حوالت	PH	
	1200 South Pine Island Road		_ 12	ယ္အ	C
	P.O. Box NOT acceptable Plantation, FL 33324		REGION OF	05	
The street addre	ess of its registered office and the street address of the identical.	ne business office of i	ts registe	ered age	ent.
Such change wa authorized by th	as authorized by resolution duly adopted by its board ne board, or the corporation has been notified in writ	d of directors or by an ting of the change.	officer	SO	
As-	· · · · · · · · · · · · · · · · · · ·	yagam, Secretary			
I kereby accept I further agree	te of an officer or director the appointment as registered agent and agree to a to comply with the provisions of all statutes relative id I am familiar with and accept the obligation of m ing filed merely to reflect a change in the registered s been notified in writing of this change.	to the proper and cor	nplete p	erforme Or, if rm that	_ unce this the
سقان عجالج					
Sig	nature of Registered Agent	Date			_
If signing on be	chalf of an entity:				
	oretary of Veorp Services, LLC				
	* * * FILING FEE: \$35.00 *	* * *			