Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H230001051143)))



H230001051143ABCR

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

Phone : (307)200-2803

Fax Number

: (855)330-1010

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

Email	Address:		ξ,	· · _
		,	, , ,	
		•		

REGISTERED AGENT CHANGE TRIDGE TRADE INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

Electronic Filing Menu Corporate Filing Menu

Help

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

statement of change is submitted for a corporation o	7.0502, 607.1508, or 617.1508, Florida Statutes, this organized under the laws of the State of Delaware registered agent, or both, in the State of Florida.				
1. The name of the corporation: Tridge Trade In	nc.				
2. The principal office address: 180 STEUART S	ST UNIT 192750, SAN FRANCISCO, CA 94119				
3. The mailing address (if different): 7901 4th St	N STE 300, St. Petersburg, FL 33702				
4. Date of incorporation/qualification: 01/05/22 Document number: F2200000190					
5. The name and street address of the current registe Florida Department of State: (If resigned, enter re					
LUGO, MIRNA P					
8502 NW 80 ST UNIT 100	0				
MEDLEY, FL 33166					
6. The name and street address of the new registered (if changed):	t LLC 2023 HAR 20				
Northwest Registered Agent LLC					
7901 4th St N STE 300					
P.O. Box NOT acceptable					
The street address of its registered office and the stas changed will be identical.	street address of the business office of its registered agent.				
Such change was authorized by resolution duly ad- authorized by the board, or the corporation has bee	opted by its board of directors or by an officer so en notified in writing of the change.				
Hoskik Shin Signature of an officer or director	Hoshik Shin - President Printed or typed name and title				
I hereby accept the appointment as registered ages I further agree to comply with the provisions of all of my duties, and I am familiar with and accept the document is being filed merely to reflect a change corporation has been notified in writing of this cho	l statutes relative to the proper and complete performance e obligation of my position as registered agent. Or, if this in the registered office address. I hereby confirm that the				
Taylor Nama	03/20/2023				
Signature of Registered Agent	Date				
If signing on behalf of an entity:					
Taylor Newman					
Typed or Printed Name					

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

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