F2300000005

(Requestor's Name)	·
	Address)	
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(Address)	
(City/State/Zip/Phone #)	
E PICK-UP	☐ WAIT	MAIL
•		
·	Business Entity Name)	
(Business Entity Name;	
(Document Number)	
Certified Copies	Certificates of S	Status
	·····	
Special Instructions	to Filing Officer	

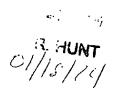
Office Use Only

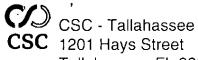


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SESTATE

THE WELL SEED





Tallahassee, FL 32301-2607 850-558-1500, Ext: 61592

To: Department Of State, Division Of Corporations

From: Alexxis Weiland-Sorenson

Ext: 61592 Date: 01/18/24 Order #: 1387740-1 Re: Partner Hero Inc.

Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed-please-find:—

Application for Certificate of Authority

Amount to be deducted from our State Account: \$25.00 - FL State Account Number:

I2000000195 Authorization:

Please take the following action:

File in your office on basis

Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

COVER LETTER

COVE	R LETTER
TO: Registration Section Division of Corporations	
SUBJECT: Partner Hero Inc.	
	Business Organization)
Dear Sir or Madam:	
The enclosed Statement of Change of Registered Ag fee(s) are submitted for filing.	ent/Registered Office for Alien Business Organization and
Please return all correspondence concerning this mat	ter to the following:
Ivy M. Shapiro, Paralegal	
(Name of Person)	
Blank Rome LLP	
(Firm/Company)	
One Logan Square	 2
(Address)	SOCIAL TRANSPORT
Philadelphia, PA 19103	PM 3: 07
(City/State and Zip Code)	
For further information concerning this matter, pleas	e call:
Ivy M. Shapiro at (215	569-5784
	Code & Daytime Telephone Number)
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the following amount:	
□ \$35.00 Filing Fee	☐ \$43.75 Filing Fee & Certified Copy

. Partner Hero Inc.

STATEMENT OF CHANGE OF REGISTERED AGENT AND/OR REGISTERED OFFICE FOR ALIEN BUSINESS ORGANIZATION

PURSUANT TO SECTION 607.0505, FLORIDA STATUTES, THE UNDERSIGNED ALIEN BUSINESS ORGANIZATION SUBMITS THE FOLLOWING STATEMENT IN ORDER TO CHANGE ITS REGISTERED OFFICE AND/OR REGISTERED AGENT:

12/29/2022	(Name of alien business organization) 3 F23000000005	4. 47-1206289			
(Florida registration date)	(Florida document number)	(FEI Number, i	(FEI Number, if applicable)		
250 S 5th St. Ste. 400, Boise,	ID 83702				
	(Principal office address)				
Name and address of registere	d agent and office currently on reco	ord with this office:			
Registered Agents	Inc.				
7901 4th St N Ste	300		-		
St. Petersburg, FL	33702		- 		
New registered agent and/or o	ffice address:		71.		
Corporation Service					
1201 Hays Street		SS.	β PH	ċ	
Tallahassee, FL 32	2301	F. F.	် မှ	lae.	
(Note:	Registered office must be a Florida street	address)	7		
registered agent are identical. Such change was authorized to authorized by the board of dir Coccusioned by: Ryan Burk		cer of the corporation			
EU7805F0835A420 (Sig	nature of chairman, vice chairman, or offic	cer)	_		
Ryan Berk, Chief Financial C	Officer and Treasurer				
(Nai	ne and capacity of person signing in numb	per 10 above)	_		
 Signature of new registered a I hereby accept the appointn obligations of section 607.05 	nent as registered agent. I am fami	iliar with and accept	the		
alixis Weilard-	-Sonson, Aup				

FILING FEE: \$35.00

Make checks payable to Florida Department of State and mail to: Division of Corporations P. O. Box 6327 - Tallahassee, FL 32314