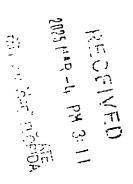
F2300000 2220

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
J. HORNE MAR - 5 2025				

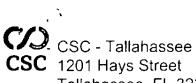
Office Use Only



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FILED 2025 MAR -4 PH 12: 34



Tallahassee, FL 32301-2607 850-558-1500, Ext: x62969

To: Department Of State, Division Of Corporations From: Amanda Miller - Amanda.Miller@cscglobal.com

Ext: x62969 Date: 03/04/25 Order #: 1855228-6

Re: STABILITY AI US SERVICES CORPORATION

Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Change of Registered Agent and Office

Check in the amount of: \$35.00 - FL State Account Number: I20000000195

Please take the following action:

File on a routine basis
Issue proof of filing
Return evidence to the following:
ATTN: Amanda Miller
c/o Corporation Service Company
251 Little Falls Drive
Wilmington, DE 19808

Special Instructions:

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

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

statement of cha	nge is submitted for a corporation o	1.0502, 607.1508, or 617.1508, Florida Stat rganized under the laws of the State of De egistered agent, or both, in the State of Flor	elaware	
1. The name of t	he corporation: STABILITY AI US	SERVICES CORPORATION		
2. The principal	office address: 800 North State Stre	eet, Suite 304, Dover, DE 19901		
3. The mailing a	ddress (if different):			
4. Date of incorp	poration/qualification: 04/14/2023	Document number: F23000002	220	
	I street address of the current register tment of State: (If resigned, enter res	red agent and registered office on file with t signed)	the	
	Registered Agents Inc.			
	7901 4th Street N, Suite 300			
	St. Petersburg, FL 33702			
6. The name and (if changed):	agent (if changed) and /or registered office	TOTS HAR -4 PH 12: 34		
	Corporation Service Company		7 10	
1201 Hays Street			55	
	Tallahassee P.G	O. Box NOT acceptable FL 32301	(i)	
The street addre	ess of its registered office and the st be identical.	reet address of the business office of its re	_	
Such change wa authorized by th	as authorized by resolution duly add to board, or the corporation has bee	opted by its board of directors or by an off in notified in writing of the change.	icer so	
/s/ Christian Dowell		Christian Dowell, Secretary	Christian Dowell, Secretary	
Signature of an officer or director		Printed or typed name and title		
I further agree t of my duties, an document is bei corporation has	the appointment as registered agen to comply with the provisions of all d I am familiar with and accept the ng filed merely to reflect a change to been notified in writing of this cha n Service Company	statutes relative to the proper and comple obligation of my position as registered ag in the registered office address, I hereby o	ete performance gent. Or, if this confirm that the	
ву:	in Lei	03/04/2025		
	nature of Registered Agent	Date	<u> </u>	
If signing on be	half of an entity:			
<u>`</u>	Asst. Vice President			
T	yped or Printed Name			
	* * * FILING	G FEE: \$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)