Division of Corporations

Flexion Department of State Division of Corporations Election & State Election & St

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : INCORP SERVICES INC

Account Number: 120120000007 Phone: (702)866-2500 Fax Number: (702)900-2290

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

Email Address: managedreports@incorp.com

REGISTERED AGENT CHANGE KIWI FINANCIAL, INC.

Llefeavers 6/9/25

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COVER LETTER

TO: Amendment Section

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Division of Corporations		
SUBJECT: Kiwi Financial, Inc. Name of Corporation		
DOCUMENT NUMBER: F24000003347	··········	
The enclosed Statement of Change of Registered Offic	ce/Agent and fee are submitted for filing.	
Please return all correspondence concerning this matt	er to the following:	
Kathy Shin		
Name of Contact Person		
InCorp Services, Inc.		
Firm/Company		
9107 West Russell Road, Suite 100 Address		
Las Vegas, NV 89148-1233		
City/State and Zip Code		
managedroporte@incorn.com	3	
E-mail address: (to be used for future annual repo	ort notification)	
For further information concerning this matter, please	call:	
To further measurement of this matter, please	Cati.	
InCorp Services, Inc. / Kathy Shin Name of Contact Person	at (<u>800</u>) <u>246-2677</u> Area Code & Daytime Telephone Number	
Name of Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a \$35.00 check made payable to the Depa	rtment of State.	
• • • • • •		
Mailing Address:	Street Address:	
Amendment Section	Amendment Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327	The Centre of Tallahassee	
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810	

CR2E045 (04/13)

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Tallahassee, FL 32303

H25000203148 3STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

	•	2. 617.0502, 607.1508, or 617.1508, Florida Statute tion organized under the laws of the State of PR	es, this	
in orde	r to change its registered office	or registered agent, or both, in the State of Florida	≀ .	
t. The name of	the corporation: Kiwi Financia	al, Inc.		
2. The principal office address: 7901 4TH ST. N. STE. 300 ST., PETERSBURG, FL 33702				
3. The mailing a	nddress (if different):		••••	
4. Date of incor	poration/qualification: <u>06/18/2</u>	2024 Document number: F240000033	47	
	d street address of the current re rtment of State: (If resigned, ent	gistered agent and registered office on file with the ter resigned)		
	REGISTERED AGENTS II	NC		
) 	. 2	
	ST. PETERSBURG, FL 33	3702 TS	025 J	
6. The name and (if changed):		tered agent (if changed) and for registered offices	(!)	
	InCorp Services, Inc.			
	3458 Lakeshore Drive	(1) (1) (1) (1)	8: 41	
		F.O. Box: NOT acceptable		
	Tallahassee, FL 32312			
The street address changed will	ess of its registered office and t be identical.	the street address of the business office of its regis	stered agent,	
Such change was authorized by the	as authorized by resolution dul- he board, or the corporation has	y adopted by its board of directors or by an office s been notified in writing of the change.	er so	
		Sejal Patel, CCO		
•	reo il	Printed or typed name and title	-	
1 jurther agree of my duties, ar document is bei	the appointment as registered to comply with the provisions of all am familiar with and acceping filed merely to reflect a chast been notified in writing of the	agent and agree to act in this capacity, of all statutes relative to the proper and complete of the obligation of my position as registered agenting in the registered affice address. I hereby consciouse.	perjormance it. Or, if this firm that the	
Annexin-	Justice of Registered Agent	06/02/2025 Ελκε		
	chalf of an entity:	•		
Louise Breytenba	ich on behalf of InCorp Services, In	ac.		
	yped or Printed Name	*****		
	* * * FH	LING 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)