L16000129379

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Account#: I20000000088

Date:	03/02/2022						
Name:	Merritt Walker						
	1595973	_					
		PLATINUM-HR, LLC					
Articl	les of Incorporation/Authorization	to Transact Business					
☐ Ame	ndment						
Reinstatement							
☐ Conv	Conversion						
☐ Merg	ger						
☐ Disso	olution/Withdrawal						
☐ Fictit	ious Name						
☐ Othe	ι						
Authorized /	Amount: \$25	<u></u>					
Signature: _	uw						

F: 800,944.6607



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Account#: I20000000088

Date:	03/02/2022						
	Merritt Walker						
	#:1595973						
	e: PL A	TINUM-HR, LLC					
	cles of Incorporation/Authoriza						
☐ Ame	endment						
✓ Change of Agent							
☐ Rein	nstatement						
Con	version						
☐ Merç	ger						
☐ Diss	olution/Withdrawal						
☐ Fiction	tious Name						
Othe	er						
Authorized	Amount: \$25	<u> </u>					
Signature:	uu)					

F: +852.2682.9790

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116. Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

Florie	la.	_			- -	
1. N	lame of the limited liability company	: PLATINUN	И-HR, LLC	<u> </u>		
2. (a)	2600 W. Geronimo Place, Su	uite 100	(b)	_{b)} 2600 W. Geronimo Place, Suite 100		
(,,	Principal office address of limited liability company: (Note: MUST BE STREET (DDRESS)				Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	Chandler, AZ 85224			Chandler, AZ 85224		
						
	July 8, 2016			L1	16000129379	
3.	Date of filing/registration	in Florida	4.		Document number	
5. (a	Corporation Service Compa	ny				
(4.	Registered Agent and Registered Office sl	sown on the records of	of the Florida l	Dept. of State:	:	
	1201 Hays Street					
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					
					202	
	Tallahassee	, ŀ	_{L_} 32301-	2525	2022 HAC -2	
(b)	COGENCY GLOBAL INC.					
	Enter name of NEW Registered Agent an	id/or <u>NEW Register</u>	ed Office add	ress:	:: -	
	115 North Calhoun St., Suite 4				\$0.5° Ed	
	NEW Registered Office Address:					
	Tallahassee		32301			
	Talialiassee	, 1-	T_02301			
the ch agent was/w	ange or changes are made, the Florid will be identical. Or, in the case of a	da street address of a Florida limited e of the members	of the regist liability cor of the limit	ered office npany, it is ted liability	rida, it is hereby confirmed that after and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany.	
/s/ K	ara Childress		Kara	Childress		
Signature of a member or authorized representative of a member				Printed or typed name of signee		
provis the ob to me	why accept the appointment as regist sions of all statutes relative to the pro- digations of my position as registere wely reflect a change in the registered in writing of this change.	ered agent and a oper and complet d agent as provia d office address,	gree to act i te performa led for in Ci I hereby con	in this capa nce of my d hapter 605, ufirm that t	city. I further agree to comply with the luties, and I am familiar with and accept F.S. Or, if this document is being filed he limited liability company has been	

Signature of Registered Agent

Tim Mayville, Assistant Secretary Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00