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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088

| Date: | 10/28/2021 | | | | |
|--------------------------|-------------------------------------|---------------------|--|--|--|
| Name: | Eric Marcano | | | | |
| Reference # | | | | | |
| Entity Name | ORANGE & BLUI | HOLDINGS 5.0, LLC | | | |
| _ | | | | | |
| Article | es of Incorporation/Authorization t | o Transact Business | | | |
| Amendment | | | | | |
| ✓ Change of Agent | | | | | |
| Reinstatement | | | | | |
| Conversion | | | | | |
| ☐ Merger | | | | | |
| ☐ Dissolution/Withdrawal | | | | | |
| Fictitious Name | | | | | |
| Other | | | | | |
| | | | | | |
| Authorized A | mount: \$25.00 | | | | |
| Signature: _ | Eric Marcano | | | | |

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.

| F. | Na | nne of the limited liability company: ORANGE & E | BLUE HO | LDINGS 5.0, LLC | |
|--|------------------|---|---|---|--|
| 2. (a | a) | 5404 Cypress Center Drive Suite 150 | (b) | 5404 Cypress Center Drive Suite 150 | |
| | | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | | Mailing address of limited liability company: (Note: MAY BE POST OF FICE BOX) | |
| | | Tampa FL 33609 | . | Tampa FL 33609 | |
| | | June 25, 2020 | | L20000172294 | |
| 3. | | Date of filing/registration in Florida | 4. | Document number | |
| 5. (| a) | SMITH HULSEY & BUSEY, PROFESSIONAL | ASSOC | | |
| Registered Agent and Registered Office shown on the records of the Florida Dept, of State: | | | | | |
| | | ONE INDEPENDENT DRIVE STE 3300 | | | |
| | | Registered Office Address (MUST BE FLORIDA STREET AE | DRESS) | | |
| | | | | _2 | |
| | | JACKSONVILLE , FL | 32202 | TOPLOCT 29 MH 8: 03 | |
| (b | o) . | COGENCY GLOBAL INC. | | 129 Th | |
| | | Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered O</u> | ffice address | Soft I | |
| | | 115 North Calhoun St., Suite 4 | | F. S. 6. | |
| | | NEW Registered Office Address: | | FIE 33 | |
| | | Tallahassee 5.3 | 2204 | | |
| | | FL 3 | 2301 | | |
| agent was/v | na: Lw we: | mited liability company is not organized under the laws age or changes are made, the Florida street address of the ill be identical. Or, in the case of a Florida limited liabine authorized by an affirmative vote of the members of these of organization or the operating agreement of the limited street. | e registere ility compa the limited | d office and the business office of the registered my, it is hereby confirmed that the change(s) | |
| | | tacy Mestayer | _Stacy | Mestayer | |
| | | ire of a member or authorized representative of a member | | Printed or typed name of signee | |
| the or | blij | y accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pe gations of my position as registered agent as provided f by reflect a change in the registered office address, I her in writing of this change. | to act in the programme for in Chap reby confir | his capacity. I further agree to comply with the of my duties, and I am familiar with and accept ter 605, F.S. Or, if this document is being filed in that the limited liability company has been | |
| /s/ 1 | Γin | n Mayville | | | |
| Signa | tur | of Registered Agent Tim Mayville Assistant Secret | anı | | |

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 F1LING FEE: \$25.00

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