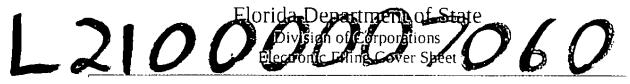
Division of Corporations



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Division of Corporations

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From:

Account Name : REGISTERED AGENTS INC.

Account Number : 120090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

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

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## LLC REGISTERED AGENT CHANGE AI DIGITAL BRANDS, LLC

Certificate of Status	0
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## 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.

1. Na	ame of the limited liability company:AI DIGITAL BRAN	NDS, LLC				
2. (a)		(b)				
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
	01/01/21	L210000	07060			
3.	Date of filing/registration in Florida	4.	Document number			
5. (a)	KAMINSKIY, ALEKSANDR					
J. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:					
	Registered Office Address (MUST BE FLORIDA STREET)	<del></del>				
	51 PINE GROVE DRIVE					
	PALM COAST	32164	2023 f.			
	Registered Agents Inc		Ä			
(b)	Enter name of NEW Registered Agent and/or NEW Registered					
		Control House Control				
	7901 4th St N					
	NEW Registered Office Address:	 8: <b>↓</b> 7				
	STE 300	7				
	St. Petersburg , FL	33702				
the cha agent v was/we the arti	imited liability company is not organized under the layinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited light authorized by an affirmative vote of the members of the organization or the operating agreement of the street and street actions.	the registered of ability company, of the limited liab	fice and the business office of the registered it is hereby confirmed that the change(s) ility company or as otherwise provided in			
	ture of a member or authorized representative of a member	<del></del> -	Printed or typed name of signee			
provisi the obl to mere notifice	by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete ligations of my position as registered agent as provide by reflect a change in the registered office address, I id in writing of this change.  The David Roberts - Assistant Se	performance of r d for in Chapter ( hereby confirm th	rapacity. I further agree to comply with the ny duties, and I am familiar with and accept 605, F.S. Or, if this document is being filed tat the limited liability company has been			
	re of Registered Agent	20.01617				