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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (855)330-1010

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LLC REGISTERED AGENT CHANGE THE CRYPTO CURRENCY LEARNING CENTER LLC Section 1.

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T. LEMIEUX APR 2 6 2023

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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 of registered agent, or both, in the State of Florida.

1. Na	me of the limited liability company: THE CRYPTO CURRENCY LEARNING CENTER LLC						
2. (a)	Principal office address of limited liability company:	(b)	Mailing address of limited hability company:				
	(Note: MUST BE STREET ADDRESS)		(<u>Note: MAY B</u>	E POST OF	FICE BO	<u></u>	
	03/29/2021		000144180 Document number				
3.	Date of filing/registration in Florida	4.	Document nui	mber			
5. (a)	UNITED STATES CORPORATION AGENT Registered Agent and Registered Office shown on the records of 476 RIVERSIDE AVE. Registered Office Address (MUST BE FLORIDA STREET)	of the Florida Dept.)					
	JACKSONVILLE	n <u>32202</u>	1844 — · · · · ·	U,	2023 777		
(b)	Registered Agents Inc	1.0.00			. }		
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registero</u>	<u>'a Omce aduress</u> :		:	25	_	
	7901 4th St N			•	PX	(_	
	<u>NEW</u> Registered Office Address:		•	\$. <u>.</u> ; :	\ddot{S}		
	STE 300			••	ည		
	St. Petersburg	T. 33702					
the cha agent v was/wi the arti = !->	imited liability company is not organized under the lange or changes are made, the Florida street address owill be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	of the registered liability compan of the limited li e limited liabilit	office and the busin by, it is hereby confir iability company or a ty company.	iess office (med that t	of the r he char	registered rge(s)	
/ 、ノー Signa	ture of a member or authorized representative of a member	Robin Jo	Ones Printed or typed	name of sign	 100	· · · · · · · · · · · · · · · · · · ·	
	· · · · · · · · · · · · · · · · · · ·						

Thereby accept the appointment as registered agent and agree to act in this capacity. I jurther agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent