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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

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

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LLC REGISTERED AGENT CHANGE INTRIX TRADING LLC

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M. SOLOMON

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11/11/2024 12:31:07 PST To: 18506176383 Page: 2/2 Fax: 8134365206

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	me of the limited liability company:	LLC					
2.	(a)		(b)				
	()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	- `	, N	Aailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
3		04/26/2021	- - 4.	L210001937	715 Document number			
3.		Date of filing/registration in Florida INCORP SERVICES, INC.	4.		DOCUMENT HUMBER			
5. ((a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State 3458 LAKESHORE DRIVE			. Co	21 AON 1202	Mary Land	
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				, N	gran.	
		TALLAHASSEE FL 3	32312			PH L:		
(h)	(b)	REGISTERED AGENTS INC			一 图	80		
	(**)	Enter name of NEW Registered Agent and/or NEW Registered Office address:						
		7901 4TH ST N						
		NEW Registered Office Address: STE 300						
		ST. PETERSBURG	33702					
cha age wa the	ange ent v s/we e arti	imited liability company is not organized under the laws or changes are made, the Florida street address of the rivill be identical. Or, in the case of a Florida limited liability authorized by an affirmative vote of the members of cles of organization or the operating agreement of the liability.	egistere oility con the limi imited li	d office and mpany, it is ited liability ability com	I the business office of the hereby confirmed that the company or as otherwise	ie regist ne chanț	ered ge(s)	
$\frac{1}{s}$	Cz Genal	are of a member or authorized representative of a member	Robi	n Jones	Printed or typed name of sign	100		
11 pro the to	herel ovisi obl merc tifiec	by accept the appointment as registered agent and agre- ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided By reflect a change in the registered office address, I he I'm writing of this change.	e to act erforma for in C ereby co	in this capa nce of my d hapter 605, nfirm that th	city. I further agree to c	omply v	vith the d accept ng filed been	
Si ₁		David Roberts re of Registered Agent						