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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 : (855)330-1010

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

| Email | Address: | | |
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LLC REGISTERED AGENT CHANGE EMERALD DIGITAL STUDIO LLC

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
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| Estimated Charge | \$25.00 |

T. LEMIEUX MAR-1-6-2023

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.

| L. Na | nme of the limited liability company: Emera | ald Digita | ıl Stuc | dio 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) | | | | | |
| | 7901 4th St N STE 300 | | 7901 4 | th St N STE | | | | |
| | St. Petersburg FL 33702 | | St. Pete | rsburg FL 337 | 02 | | ., | |
| | 02/15/22 | İ | _2200 | 0063939 | | | | |
| 3. | Date of filing/registration in Florida | 4. | | Document numb | ner | | trt | |
| 5. (a) | LUPA ENTERPRISES INC | | | | | | | |
| ., (., | Registered Agent and Registered Office shown on the reco | ids of the Florida | Dept. of Stat | - c: | | | | |
| | Registered Office Address (MUST BE FLORIDA STR 600 CLEVELAND ST STE 393 CLEARWATER Registered Agents Inc | . FI, 33755 | | - | -e- | 2023 Fiz 15 A | | |
| (b) | Enter name of NEW Registered Agent and/or NEW Regi | stered Office add | ress: | - | - | AM II: I | | |
| | 7901 4th St N | | | | | 12 | | |
| | NEW Registered Office Address: STE 300 | | | - | | | | |
| | St. Petersburg | FL_33702 | | _ | | | | |
| the chargent v was/we the arti | imited liability company is not organized under tange or changes are made, the Florida street addrawill be identical. Or, in the case of a Florida limitere authorized by an affirmative vote of the membicles of organization or the operating agreement of the member of a member or authorized representative of a member by accept the appointment as registered agent and ions of all statutes relative to the proper and combigations of my position as registered agent as precise reflect a change in the registered office address. | ess of the regis ted liability co bers of the limi of the limited li | nered office npany, it is ted liability ability cor | e and the busines shereby confirm y company or as upany. ROBIN JON Printed or typed name its and a further or typed name its | s office of ed that the otherwise | the reg change provide | gistered e(s) ed in | |

Signature of Registered Agent

notified in writing of this change.

David Roberts - Assistant Secretary