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Division of Corporations

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Account Name : COMPUTERSHARE Account Number : 110432003053 : (5611694-8107 Phone Fax Number : (561)214-8442

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 PAMANA CURATED DESIGNS LLC

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K. SALY

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.

| i. | Na | ame of the limited liability company: Pamana Curated D |)esign | s Ll | LC | | |
|-----------------------|--------------------|---|-------------------------------------|----------------------------|--|--|---|
| 2. (| a) | 2427 Walnut Heights Rd | | (b) | 2427 Waln | nut Heights Rd | |
| Ξ., | , | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | | ,0, | | | ited liability company: OST OFFICE BOX) |
| | | Apopka, FL 32703 | _ | | Apopka, Fl | L 32703 | |
| | | 09/02/2022 | | i | .220003864 | 178 | |
| 3. | | Date of filing/registration in Florida | 4. | - | | Document numbe | ٢ |
| 5. (| a) | LEGALINC CORPORATE SERVICES INC. | | | | | |
| | , | Registered Agent and Registered Office shown on the records of the | he Flor | rida | Dept, of State | - :: | 20 |
| | | 476 Riverside Ave. | | | | | |
| | | Registered Office Address (MUST BE FLORIDA STREET ADDRESS) | | | • | | |
| | | | | | | | 一部 6 |
| (b) | | Jacksonville FL | 32202 | ! | | | DEA SEP 10 JAN 4: 30 |
| | o) | Corporate Creations Network Inc. | | | | | TANSO 4: 30 |
| | | Enter name of NEW Registered Agent and/or NEW Registered C | Office | udd | ress: | | • |
| | | 801 US Highway 1 | | | | | |
| | | NEW Registered Office Address: | | | | | |
| | | | | | | | |
| | | North Palm Beach , FL | 33408 | | | | |
| chan agen was/ | ge t u we | mited liability company is not organized under the laws or changes are made, the Florida street address of the re fill be identical. Or, in the case of a Florida limited liab re authorized by an affirmative vote of the members of cles of organization or the operating agreement of the li | egiste sility the li | ered com imit | l office and pany, it is ed liability | the business office hereby confirmed company or as of | ce of the registered that the change(s) |
| | | Kristen Espinales | K | riste | n Espinales, | , Attorney-in-Fact | |
| Sig | nati | ure of a member or authorized representative of a member | | | | Printed or typed name | e of signee |
| prov the o to m | isio bli gre | y accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete p gations of my position as registered agent as provided ly reflect a change in the registered office address, I he in writing of this change. | e to a erfori for in ereby | ct ii man (Ch con | n this capac ice of my di apter 605, firm that th | city. I further agr uties, and I am Ja F.S. Or, if this do he limited liability | ee to comply with the miliar with and accept ocument is being filed company has been |
| | | Kristen Espinales Kristen Espinates. Special Secretary | | | | | |

Signature of Registered Agent