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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195 REFERENCE : 554833 AUTHORIZATION COST LIMIT : \$/ ORDER DATE: March 8, 2023 ORDER TIME : 8:59 AM ORDER NO. : 554833-010 CUSTOMER NO: 7991777 CHANGE OF AGENT NAME: THE EDRINGTON GROUP USA, LLC PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: ___ CERTIFIED COPY XX PLAIN STAMPED COPY CONTACT PERSON: Eyliena Baker

EXAMINER'S INITIALS:

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. N	ame of the limited liability company: THE EDRING	TON GR	NO0	P USA LLC		
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(0)	Mailing address of i	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	18 West 24th Street 4th FI			18 West 24th Street 4th F		
	New York, NY 10010		_	New York, NY 10010		-
	05/01/2014		M	114000003018		
3.	Date of filing/registration in Florida	4.		Document numb	 ber	
5. (a)						
// (<u>=</u>)	Registered Agent and Registered Office shown on the records of Portela, Jada	of the Flori	ida D	Dept. of State;		
	Registered Office Address (MUST BE FLORIDA STREET)	TADDRE!	<u>SS)</u>	·		
	1101 Brickell Avenue Suite N-1824				2623	
	MIAMI	33129	ı		2023 HAR	7
		1		 _	ب و و	 I
(b) <u>-</u>	Enter name of NEW Registered Agent and/or NEW Registered Office address: Corporation Service Company			ess:	科 9: 01	j
	NEW Registered Office Address:	-				
	1201 Hays Street					
	Tallahassee Fi	L_32301				
gent w as/wer e artic	nited liability company is not organized under the la or changes are made, the Florida street address of the ill be identical. Or, in the case of a Florida limited li re authorized by an affirmative vote of the members of les of organization or the operating agreement of the like Zitelli,	e register iability co of the line limited	ed omp nited liab	office and the business off pany, it is hereby confirmed diability company of as a	ice of the regi	istered
Signatu	re of a member or authorized representative of a member		Printed or typed name of signee			
ie oblig merel otified	vaccept the appointment as registered agent and agr ns of all statutes relative to the proper and complete gations of my position as registered agent as provided y reflect a change in the registered office address, 1) in writing of this change.	ree to act perform d for in (hereby co	t in t ance Chaj onfi	this capacity. I further ag e of my duties, and I am fo pter 605, F.S. Or, if this o rm that the limited liabilit	ree to comply miliar with a locument is hi y company ha	with the and accept eing filed as been
_	of Registered Agent					
_	\sim					