Division of Corporations **Electronic Filing Cover Sheet**

Florida Department of State

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : UNITED AGENT GROUP INC.

Account Number : 120160000086 Phone : (561)508-5033 Fax Number : (561)694-1639

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

govdocs@unitedagentgroup.com Email Address:

LLC REGISTERED AGENT CHANGE FX ALLIANCE, LLC

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JUL 0 7 2021

Help

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

1. The name of the limited liability company is: FX Alli	ance, LLC	_
2. (a) Principal office address of the limited liability company:	Three Times Square	_
(Note: MUST BE STREET ADDRESS)	New York NY 10036	
(b) Mailing address of limited liability company:	Three Times Square	
(Note: MAY BE POST OFFICE BOX)	New York NY 10036	-
4/23/2015	M15000003097	
3. Date of filing/registration in Florida5.(a) Registered Agent and Registered Office shown of	4. Document number on the records of the Florida Dept. of State:	SEVIC
Registered Agent:	Corporation Service Company	
Registered Office Address:		- 0F CO
	Tallahassee FL 32301	- 종유C
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Re</u>	<u> </u>	85
NEW Registered Agent:	United Agent Group Inc.	3 95 - 95
NEW Registered Office Address:	801 US Highway 1	
(MUST BE FLORIDA STREET ADDRESS)		_
	North Palm Beach FL 33408	_
If the limited liability company is not organized under the laws or changes are made, the Florida street address of the registered identical. Or, in the case of a Florida limited liability company, an affirmative vote of the members of the limited liability company the operating agreement of the limited liability company.	office and the business office of the registered agent will be it is hereby confirmed that the change(s) was/were authorize	d by
(Signature of a member or authorized representative of a member)	······	
Saray Djidji, Attorney-in-Fact (Printed or Typed name of signee)		
I hereby accept the appointment as registered agent and agree to fall statutes relative to the proper and complete performance of my position as registered agent as provided for in Chapter 605, in the registered office address, I hereby confirm that the limited	of my duties, and I am familiar with and accept the obligation F.S. Or, if this document is being filed to merely reflect a ch	ns of lange
(Signature of Registered Agent) Division of Corporations, P.O. Be		
INHS18(10399)	v. v	
United Agent Group Inc.		
801 US Highway 1 North Palm Beach FL 33408 561-508-5033		