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Office Use Only



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2019 SEP 23 AH 10: 28

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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 930428

AUTHORIZATION

COST LIMIT

ORDER DATE: September 23, 2019

ORDER TIME : 10:45 AM

ORDER NO. : 930428-010

CUSTOMER NO: 4717754

FOREIGN FILINGS

NAME: DECIEM USA LLC

CORPORATE _ LIMITED PARTNERSHIP XX LIMITED LIABILITY COMPANY

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

__ CERTIFIED COPY XX PLAIN STAMPED COPY _____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER:

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appear	s on the records of the Florida Department of	
State: DECIEM USA LLC		
Enter new principal office address, if applicable:	138 Spring Street	
(<u>Principal office address</u> <u>MUST BE A STREET ADDRESS</u>)	3rd Floor	
	New York, NY 10012	
Enter new mailing address, if applicable:	15 Fraser Avenue	
(<u>Mailing address</u> <u>MAY BE A POST OFFICE BOX</u>)	Toronto, ON, Canada M6K 1Y7	
2. The Florida document number of this limited lia	ability company is: M17000007993	
3. Jurisdiction of its organization: Delaware	23	
4. Date authorized to do business in Florida: 09		
SECTION II (5-9 complete only the applicable	5	
5. New name of the limited liability company: (mus	t contain "Limited Liability Company, " "L.L.C.," or "LLC.")	
(If name unavailable, enter alternate name adopted copy of the written consent of the managers or ma must contain "Limited Liability Company," "L.L.C	I for the purpose of transacting business in Florida and attach a naging members adopting the alternate name. The alternate name C." or "LLC.")	
6. If amending the registered agent and/or registered registered agent and/or the new registered office and	ed officer address on our records, enter the name of the new ddress here:	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida Street Address	
_	, Florida City Zip Code	
New Registered Agent's Signature, if changing Re	gistered Agent:	

If Changing Registered Agent, Signature of New Registered Agent

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited

liability company has been notified in writing of this change.

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Filing Fee: \$25.00