Manager

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Žip/Phone #)	
	WAIT	MAIL
	siness Entity Name)	
(Bu	smess chiny name)	
(Do	cument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	
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	Office Use Only	

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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 866.625.0838 COGENCYGLOBAL.COM

Date: July 31, 2020	Account#: I2000000088
Name: KEN HOWELL	
Reference #: 1237254	L
Entity Name:	
Articles of Incorporation/Auth	
Amendment	
✓ Change of Agent	ISSUES? CALL
Reinstatement	KEN:
	518-213-0738
Merger	
Dissolution/Withdrawal	
Fictitious Name	
Other	

Authorized Amount:	\$25.00	
Signature		
\backslash		

 CORPORATE HQ COGENCY GLOBAL INC. IC 240° 51.10° FL NY NO16 800.221,0102 +1,212,947.7200 EUROPEAN HQ
COGENCY GLOBAL (UK) LIMITED
REGISTEREON ENGLAND & WALES
REGISTER 680072
6 BEVIS MARKS, 1th FL
LONDON EC3A /BA
+44 (0)20.3786.1090

ASIA PACIFIC HQ
COGENCY GLOBAL (HK) HMITED
AHONG KONG HMITED GOMPANY
INFINITUS PLAZA, 12th FL
199 DES VOEUX RD CENTRAL
HONG KONG
+852.3975.1803

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.

a)		(b)	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company (<u>Note: MAY BE POST OFFICE BON</u>)
	No Change	N	lo Change
	October 1, 2019		M1900009884
	Date of filing/registration in Florida	4.	Document number
a)	CORPORATION SERVICE COMPANY		
,	Registered Agent and Registered Office shown on the records of	of the Florida De	pt. of State:
	1201 HAYS STREET		
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRESS)	
		T ADDRESS)	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
			525
• •	Registered Office Address (MUST BE FLORIDA STREE		525 3
»)	Registered Office Address (MUST BE FLORIDA STREE TALLAHASSEE . H	-1_32301-2	<u>د</u>
) }	Registered Office Address (MUST BE FLORIDA STREE TALLAHASSEE . H COGENCY GLOBAL INC.	-1_32301-2	<u>ω</u> <u>ω</u> <u>Ξ</u>
•)	Registered Office Address (MUST BE FLORIDA STREE TALLAHASSEE . H COGENCY GLOBAL INC. Enter name of NEW Registered Agent and/or NEW Register	-1_32301-2	<u>د</u>

/S/ David Glickman

Signature of a member or authorized representative of a member

David Glickman

Printed or typed name of signee

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.

/S/ Tim Mayville

Signature of Registered Agent

Tim Mayville, Assistant Secretary Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00