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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: 120000000088

Date:	09/16/2020	
	Merritt Walker	
Reference #:	1262244	<u></u>
	JAX ACQ	UISITION CO LLC
☐ Article	es of Incorporation/Authorization	
Amen Amen	dment	
✓ Chang	ge of Agent	
Reins	tatement	
☐ Conve	ersion	
☐ Merge	2 Γ	
☐ Dissol	lution/Withdrawal	
Fictition	ous Name	
Other_		
Authorized A	mount: \$25	
Signature:	mw	

F: 800.944.6607

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

r ten tea	τ.			
1. Na	me of the limited liability company:JAX A	CQUISITION	CO LLC	
2. (a)	255 GREENWICH STREET, FL4	(b)	255 GREENWICH STRI	EET, FL4
	Principal office address of limited liability compa (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	NEW YORK, NY 10007		NEW YORK, NY 10007	7
	February 18, 2020		M20000001	1912
3.	Date of filing/registration in Florida	4.	Document number	
5. (a)	Corporation Service Company			
J. (a)	Registered Agent and Registered Office shown on the rec	cords of the Florida D	Dept. of State:	
	1201 Hays Street			
	Registered Office Address	TREET ADDRESS)	- 	,S E202
	Tallahassee	. FL_32301-2	2525	. .
(b)	COGENCY GLOBAL INC.			
,	Enter name of <u>NEW Registered Agent</u> and or <u>NEW Registered Agent</u>	ess:	All 10: 24	
	115 North Calhoun St., Suite 4			
	NEW Registered Office Address:			
	Tallahassee	. FL_32301		
the cha agent v was/wo	imited liability company is not organized under inge or changes are made, the Florida street add will be identical. Or, in the case of a Florida lin are authorized by an affirmative vote of the men cles of organization or the operating agreement	the laws of the S ress of the registe nited liability com nbers of the limit	red office and the business o pany, it is hereby confirmed ed liability company or as off	ffice of the registered that the change(s)
/s/ Eric Kinariwala			inariwala	
Signature of a member or authorized representative of a member			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 it have registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent

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