## M2000000998

| +                       | (Requestor's Name)       |        |
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|                         | (madassars manne)        |        |
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|                         | (Address)                |        |
|                         |                          |        |
|                         | (City/State/Zip/Phone #) |        |
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| PICK-UF                 | WAIT                     | MAIL   |
|                         |                          |        |
|                         | (Dusing a Entity Name)   |        |
|                         | (Business Entity Name)   |        |
|                         |                          |        |
|                         | (Document Number)        |        |
|                         |                          |        |
| Certified Copies        | Certificates of          | Status |
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| <del></del>             |                          |        |
| Special Instructions to | Filing Officer:          |        |
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Office Use Only



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LLC RA & RO Change.



### JE 22 AM ID: 19

A. RAMSEY
JUN 2 3 2023

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

|                | ACCOUNT NO.                             | : 12000000   | 0195      |  |
|----------------|-----------------------------------------|--------------|-----------|--|
|                | REFERENCE                               | : 813916     | 8416213   |  |
|                | AUTHORIZATION                           | ·            | reledenan |  |
|                | COST LIMIT                              | : \$ 25.00   |           |  |
| ORDER DATE :   | June 14, 2023                           |              |           |  |
| ORDER TIME :   | 8:28 AM                                 |              |           |  |
| ORDER NO. :    | 813916-008                              |              |           |  |
| CUSTOMER NO:   | 8416213                                 |              |           |  |
|                |                                         |              |           |  |
|                | CHANGE OF AC                            | <u>GENT</u>  |           |  |
| NAME :         | CREDICO (USA)                           | LLC          |           |  |
| CERTIF         | THE FOLLOWING AS TIED COPY STAMPED COPY | PROOF OF FII | LING:     |  |
| CONTACT PERSON | : Alexxis Weilar                        | nd-sorenson  |           |  |

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. Na                                                | ame of the limited liability company: CREDICO (US                                                                                                                                                                                                                                                | A) LLC                                               |                                                                    |                                                                                                                                                                   |
|------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------|--------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                                      |                                                                                                                                                                                                                                                                                                  |                                                      | b)                                                                 |                                                                                                                                                                   |
| (u)                                                  | Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)                                                                                                                                                                                                           |                                                      | <u> </u>                                                           | Aailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)                                                                                     |
|                                                      | 7901 4th St N STE 300                                                                                                                                                                                                                                                                            |                                                      | 7901 4th 9                                                         | St N STE 300                                                                                                                                                      |
|                                                      | St. Petersburg, FL 33702                                                                                                                                                                                                                                                                         |                                                      | St. Peters                                                         | burg, FL 33702                                                                                                                                                    |
|                                                      | 10/12/2020                                                                                                                                                                                                                                                                                       |                                                      | M2000000                                                           | 9098                                                                                                                                                              |
| 3.                                                   | Date of filing/registration in Florida                                                                                                                                                                                                                                                           | 4.                                                   |                                                                    | Document number                                                                                                                                                   |
| 5. (a)                                               |                                                                                                                                                                                                                                                                                                  |                                                      |                                                                    |                                                                                                                                                                   |
| <i>J.</i> (a)                                        | Registered Agent and Registered Office shown on the records of NORTHWEST REGISTERED AGENT LLC                                                                                                                                                                                                    | t the Florid                                         | a Dept. of State                                                   |                                                                                                                                                                   |
|                                                      | Registered Office Address (MUST BE FLORIDA STREET                                                                                                                                                                                                                                                | ADDRES                                               | <u>S)</u>                                                          | 90 B 1                                                                                                                                                            |
|                                                      | 7901 4th St N STE 300                                                                                                                                                                                                                                                                            |                                                      |                                                                    |                                                                                                                                                                   |
|                                                      | St. Petersburg F                                                                                                                                                                                                                                                                                 | L 33702                                              |                                                                    | 7 22                                                                                                                                                              |
| (b)                                                  | Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> Corporation Service Company                                                                                                                                                                                               | d Office ac                                          | ldress:                                                            | 103 JUH 22 TH 9: 13                                                                                                                                               |
|                                                      | NEW Registered Office Address:                                                                                                                                                                                                                                                                   |                                                      |                                                                    |                                                                                                                                                                   |
|                                                      | 1201 Hays Street                                                                                                                                                                                                                                                                                 |                                                      |                                                                    |                                                                                                                                                                   |
|                                                      | Tallahassee, F                                                                                                                                                                                                                                                                                   | L_32301                                              |                                                                    |                                                                                                                                                                   |
| change<br>agent v<br>was/we<br>the arti              | imited liability company is not organized under the last or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited large authorized by an affirmative vote of the members cles of organization or the operating agreement of the JILL CILMI | e register<br>iability co<br>of the lin<br>e limited | ed office and<br>ompany, it is<br>nited liability<br>liability com | the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany.  uthorized Person                             |
| _                                                    | ture of a member or authorized representative of a member                                                                                                                                                                                                                                        |                                                      |                                                                    | Printed or typed name of signee                                                                                                                                   |
| I herei<br>provisi<br>the obl<br>to mere<br>notified | by accept the appointment as registered agent and ag<br>ons of all statutes relative to the proper and complete<br>igations of my position as registered agent as provide<br>Ily reflect a change in the registered office address. I<br>I in writing of this change.                            | ree to act<br>perform<br>ed for in 6<br>hereby c     | in this capa<br>ance of my d<br>Thapter 605,<br>onfirm that th     | city. I further agree to comply with the luties, and I am familiar with and accept F.S. Or, if this document is being filed he limited liability company has been |
| Signatu                                              | Linaro C-Kuble<br>re of Registered Agent                                                                                                                                                                                                                                                         | GRACE                                                | E. KIRBY,                                                          | ASST, VICE PRESIDENT                                                                                                                                              |