M20000011009

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

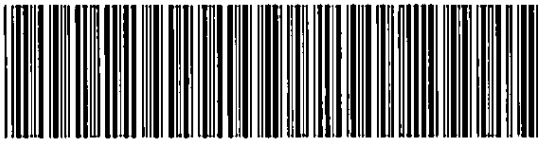
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900358611799

FILED
2021 MAR 23 AM 8:19
SECRETARY OF STATE
TALLAHASSEE, FL

2021 Mar 23 AM 8:19

M SHAKER

MAR 24 2021

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312

(850) 656-4724

DATE 3/23/2021

****WALK IN****

ENTITY NAME HUT FLORIDA LLC

DOCUMENT NUMBER _____

****PLEASE FILE THE ATTACHED AND RETURN****

XXXX Plain Copy

_____ Certified Copy

_____ Certificate of Status

_____ _____

****PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY****

_____ Certified Copy of Arts & Amendments

_____ Certified Copy of Arts & Amendments Complete File (Including Annual Reports)

_____ Certificate of Status

_____ Certificate of Status Reflecting: _____

****APOSTILLE' / NOTARIAL CERTIFICATION****

COUNTRY OF DESTINATION _____

NUMBER OF CERTIFICATES REQUESTED _____

TOTAL OWED $ 25.00 ACCOUNT # I20160000072

Please call Tina at the above number for any issues or concerns. **Thank you** so much!

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 appears on the records of the Florida Department of State: HUT FLORIDA LLC

Enter new principal office address, if applicable: _____

(Principal office address MUST BE A STREET ADDRESS) _____

_____

Enter new mailing address, if applicable: _____

(Mailing address MAY BE A POST OFFICE BOX) _____

_____

2. The Florida document number of this limited liability company is: M20000011009

3. Jurisdiction of its organization: DELAWARE

4. Date authorized to do business in Florida: JANUARY 6, 2021

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: _____
(must contain "Limited Liability Company," "L.L.C.," or "LLC")

_____

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

6. If amending the registered agent and/or registered officer address on our records, enter the name of the new registered agent and/or the new registered office address 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 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.

_____
If Changing Registered Agent, Signature of New Registered Agent

DocuSign Envelope ID: 2759F435-103D-4A89-AE44-6DEA3641A84C

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

Title/ Capacity	Name	Address	Type of Action
MBR	HUT AMERICAN GROUP LLC	225 BUSH STREET, STE 1800	☐Add
		SAN FRANCISCO, CA 94104	■Remove
CEO	GREGORY G. FLYNN	225 BUSH STREET, STE 1800	■Add
		SAN FRANCISCO, CA 94104	☐Remove
SECRETARY AND AUTHORIZED REPRESENTATIVE	RON IGARASHI	6200 OAK TREE BLVD., SUITE 250	■Add
		INDEPENDENCE, OH 44131	☐Remove
			☐Add
			☐Remove
			☐Add
			☐Remove

9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

Lorin M. Cortina
Signature of the authorized representative

Lorin M. Cortina, Executive Vice President and CFO
Typed or printed name of signee

Filing Fee: $25.00