1/17/23, 3:14 PM

## Division of Corporations Electronic Filing Cover Sheet

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|       | Division of Corporations  |
|       | Fax Number : (850)617-6383  |
| From: |   |
|       | Account Name : LEGALINC CORPORATE SERVICES INC.   |
|       | Account Number : I20180000011   |
|       | Phone : (844)386-0178   |
|       | Fax Number : (214)317-4754  |
|       | the email address for this business entity to be used for future nual report mailings. Enter only one email address please.** |
| Em    | ail Address:  |
|       | LLC REGISTERED AGENT CHANGE   |
|       |   |

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JAN 1 8 2023 A. LUNT

To: 18506176383 From: 14693173436 Date: 01/17/23 Time: 9:17 PM Page: 02/02

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

(((H230000198043)))

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 hability company: Human Interes  | t Advisors   | LLC   |   |  |  |  |  |
|--|---|--|---|---|--|--|--|--|
| 2. (a)   |   |  | (b)   |   |  |  |  |  |
| 2. (   | Principal office address of limited hability company (Nate: MUST BE STREET ADDRESS)   |  | Mailing address of limited liability company (Note: MAY BE POST OFFICE BOX) |   |  |  |  |  |
|  | 655 Montgomery Street, Suite 1800   |  | 655 Montgomery Street, Suite 1800   |   |  |  |  |  |
|  | San Francisco, CA, US, 94111  |  | San Francisco, CA, US, 94111  |   |  |  |  |  |
|  | 12-03-2020  |  | NE00000   | 011074  |  |  |  |  |
| 3.   | Date of filing registration in Florida  | 4.   |   | Document number   | · · · · · · · · · · · · · · · · · · ·                        | <del></del>                                    |  |  |
| 5. (a)   |   |  |   |   |  |  |  |  |
| J. 167   | Registered Agent and Registered Office shown on the records OT CORPORATION SYSTEM   | of the Flori   | da Dept. of S   | State   |  |  |  |  |
|  | Registered Office Address (MUST BE FLORIDA STREE  | <del>_</del>   |   |   |  |  |  |  |
|  | 1200 SOUTH PINE ISLAND ROAD   |  |   |   |  |  |  |  |
|  | PLANTATION  |  |   |   |  |  |  |  |
| (þ)  | Enter name of NEW Registered Agent and/or NEW Register  |  | 2022 JAN 17   |   |  |  |  |  |
|  | LEGALING CORPORATE SERVICES INC.  |  |   |   |  |  |  |  |
|  | NEW Registered Office Address   |  |   | <del></del>   | <b>A</b>   | 手供に  |  |  |
|  | 476 Riverside Ave.Jacksonville  |  |   |   | AM II: 2   | <u> </u>                                       |  |  |
|  | Jacksonville  | FL/32202   |   |   | 27   | •  |  |  |
| change<br>agent w<br>was we                              | imited liability company is not organized under the or changes are made, the Florida street address of tivill be identical. Or, in the case of a Florida limited authorized by an affirmative vote of the member cles of organization or the operating agreement of the Klinton Miyao | laws of the<br>he register<br>liability er<br>s of the lin<br>he limited | ed office a<br>ompany, i<br>nited liabi                                     | and the business office<br>t is hereby confirmed<br>lity company or as oth<br>ompany.                                       | e of the regi<br>that the cha                                | stered<br>nge(s)                               |  |  |
| Signat   | ture of a member or authorized representative of a member   |  |   | Printed or typed name   | of signee  |  |  |  |
| I herel<br>provision<br>the oblit<br>to mere<br>notified | by accept the appointment as registered agent and a cons of all statutes relative to the proper and completing attons of my position as registered agent as provide reflect a charge in the registered office address. The fitting of this charge.                                    | igree to ac<br>le perform<br>ded for in (<br>I hereby c                  | omce of m<br>Chapter 6<br>confirm the                                       | spacity. I further agre<br>by duties, and I am fan<br>05, F.S. Or, if this do<br>nt the limited hability<br>3000019804 3))) | te to comply<br>niliar with a<br>compant is be<br>company ha | with the<br>nd accept<br>ring filed<br>is been |  |  |
| Signatui   | e of Registered Agent   |  | - , ,   | ,,,   |  |  |  |  |