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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (614)280-3338 Phone : (954)208-0845 Fax Number

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:_

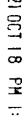
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From: Kimberly Laughre

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

2021-10-18 08:50:29 CST

SECTION 1 (1-4 must be completed)

Enter new principal office address, if applicable:		<u> </u>	
<u>Principal office address</u> MUST BE A STREET ADDRESS)			
inter new mailing address, if applicable:			
<u>Mailing address</u> MAY BE A POST OFFICE BOX)			
2. The Florida document number of this limited li			
3. Jurisdiction of its organization: Delaware			
4. Date authorized to do business in Florida:	(10/2021		
SECTION II (5-9 complete only the applicable	: changes)		
5. New name of the limited liability company:(mu	st contain "Limited Liability C	Company, " "L.L.C.,"	or "LLC
(If name unavailable, enter alternate name adopte copy of the written consent of the managers or manust contain "Limited Liability Company," "L.L.	ed for the purpose of transacting analying members adopting the .C." or "LLC.")	ng business in Florida alternate mane. The ords, enter the name of	and attack alternate
Name of New Registered Agent:	<u>.</u>		
registered agent and/or the new registered office: Name of New Registered Agent: New Registered Office Address:			
	Emer Fio	rtaa Sireet Adaress	•
	City	, Florida	n Cada
	Cih	21,	p coae

Page: 5 of 5 2021-10-18 08:50:29 CST 12122023573 From: Kimberly Laughri 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: Type of Action Address Title/ Capacity Name 910 SE 17th Street Suite 400 ΛR Ben Sinnul ⊠Add . __ .__ . Fort Lauderdale, FL 33316 ElRemove I[]Add□ Remove ∐Add □Remove $\square \land dd$ **DRemove** $\square Add$ _____ ПRелюче 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. Signature of the authorized representative

Ron J. Hoyl, Vice President

Typed or printed name of signee

Filing Fee: \$25.00