

2/1/23, 1:23 PM

Division of Corporations

Florida Department of State

Division of Corporations
Electronic Filing Cover Sheet

M2200002366

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : AGENTS AND CORPORATIONS, INC
Account Number : 120010000112
Phone : (302)575-0875
Fax Number : (302)575-1642

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

Email Address: _____

LLC REGISTERED AGENT CHANGE
DIGISHARES LLC

Certificate of Status	0
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Page Count	02
Estimated Charge	\$25.00

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K. Brumble

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. Name of the limited liability company: DIGISHARES LLC
2. (a) Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
66 WEST FLAGLER STREET, SUITE 900
MIAMI, FL 33130
- (b) Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)
66 WEST FLAGLER STREET, SUITE 900
MIAMI, FL 33130
3. FEBRUARY 14, 2022
Date of filing/registration in Florida
4. M22000002366
Document number
5. (a) GABRIEL SADOUN
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
3760 BIRD RD - UNIT 427
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
MIAMI, FL 33146
- (b) AGENTS AND CORPORATIONS, INC.
Enter name of NEW Registered Agent and/or NEW Registered Office address:
NEW Registered Office Address:
539 FIFTH AVENUE SOUTH, SUITE 330
NAPLES, FL 34102

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member

CLAUS SKAANING

Printed or typed name of signer

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.

By: John R. Williams, President of Agents and Corporations, Inc.
Signature of Registered Agent

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

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