M2200006576

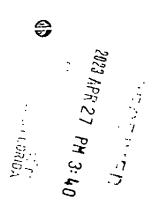
(Requesto	or's Name)	
(Address)		
(Äddress)		
(City/State	e/Zip/Phone #)
PICK-UP	WAIT	MAIL MAIL
(Business	Entity Name)	
(Documen	Number)	
. opies	Certificates	of Status
Instructions to Filing Office	cer:	

Office Use Only



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CORPORATION SERVICE COMPANY

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO	. :	12000000	0195			
REFERENC	E :	700452	8398041			
AUTHORIZATIO	: N	A 1				
COST LIMI	<u>ل</u> ے T	25,0251.00	man			
ORDER DATE : April 25, 2023	(
ORDER TIME : 1:18 PM						
ORDER NO. : 700452-027						
CUSTOMER NO: 8398041	•					
CHANGE OF AGENT						
NAME: MIZUHO AMER	ICAS	LLC				
PLEASE RETURN THE FOLLOWING	AS PR	OOF OF FI	LING:			
CERTIFIED COPY XX PLAIN STAMPED COPY						
CONTACT PERSON: Eyliena Bakı	er					
1	EXAMI	NER'S INI	TIALS:			

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.

	nme of the limited liability company: MIZUHO AME 1271 AVENUE OFF THE AMERICAS		1271 Δ	VENUE OFF THE AMERICAS
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) NEW YORK, NY 10020		(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) ORK, NY 10020
	04/27/2022		M22000	006576
3.	Date of filing/registration in Florida	4.		Document number
5. (a)				
()	Registered Agent and Registered Office shown on the records of CT CORPORATION SYSTEM	f the Florid	da Dept. of S	tate:
	Registered Office Address (MUST BE FLORIDA STREET	ADDRES	<u></u> <u>S)</u>	_
	1200 S PINE ISLAND RD	2023		
	PLANTATION F	L_33324	••	2023 APR 2
41.5				1
(b)	Enter name of NEW Registered Agent and/or NEW Registere			- ² デ
				c)
	Corporation Service Company			
	NEW Registered Office Address:			
	1201 Hays Street			_
	Tallahassee	32301 L_		
change agent w was/we	imited liability company is not organized under the later or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited later authorized by an affirmative vote of the members cles of organization or the operating agreement of the	e register iability c of the lir	red office a ompany, it nited liabil	and the business office of the registered is hereby confirmed that the change(s) lity company or as otherwise provided in
	/s/ Jill Cilmi	Jill	Cilmi, Auth	horized Person
Signat	ure of a member or authorized representative of a member			Printed or typed name of signee
provisi the obli to mere	by accept the appointment as registered agent and agens of all statutes relative to the proper and complete igations of my position as registered agent as provide by reflect a change in the registered office address, I I in writing of this change.	ree to ac perforn ed for in hereby c	t in this ca nance of my Chapter 60 confirm tha	pacity. I further agree to comply with the values, and I am familiar with and accepts, F.S. Or, if this document is being filed at the limited liability company has been
L	re of Registered Agent	Cross D	L'inhee 4 -	ct. Vice President
Signatui	ie of regimeten vient	orace i	KIIOY, AS	st. Vice President

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