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REGISTERED AGENT CHANGE OBJECT TRADING CORP.

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH. FOR CORPORATIONS

statement of char	ige is submitted for a corporation o	7.0502, 607.1508, or 617.1508, Florida Statutes, organized under the laws of the State of <u>Florida</u> registered agent, or both, in the State of Florida.	this	
1. The name of the	he corporation: Object Trading Co	огр.		
		LLP, Attention: Kelly L. Hellmath, Esq., 50 North	Laura Sti	reet.
Suite 3900, Jacks	onville, FL 32202			
3. The mailing ac	ddress (if different):			
4. Date of incorp	oration/qualification: 8/14/2001	Document number: P01000079835		
	street address of the current registe tment of State: (If resigned, enter re	ered agent and registered office on file with the esigned)		
	c/o Dr. Kenneth Beer (Resigned)	F.c.	N 3	
	1500 North Dixie Hwy, #303		20 FEB	~~~
	West Palm Beach, FL 33401	21.7 20.7 20.7 20.7	8 - 7	
6. The name and (if changed):	street address of the new registered	d agent (if changed) and for registered office	₹ :	
	Holland & Knight LLP, Attention	Kelly L. Hellmuth, Esq.	: 26	
	50 North Laura Street, Suite 3900	>	-	
	Jacksonville, FL 32202	O Box NOT acceptable		
The street addre	ss of its registered office and the s	street address of the business office of its regist	ered age	ent,
Such change wa authorized by th	es authorized by resolution duly ac the board, or the corporation has be	dopted by its board of directors or by an officer sen notified in writing of the change.	so	
Mous Signatur	e of an officer or director	Gloria M. Skigen, Authorized Representa	tive	_
I hereby accept I further agree to of my duties, an document is beil corporation has	the appointment as registered ago o comply with the provisions of al d I am familiar with and accept th ng filed merely to reflect a change been notified in writing of this ch	ent and agree to act in this capacity. It statutes relative to the proper and complete p he obligation of my position as registered agent e in the registered office address, I hereby confi hange.	erforma Or, if rm that	ince this the
Holland & Knigh	~ // •	February 6, 2020		
Sig	nature of Registered Agent	Date		_
If signing on be	half of an entity:			
Gloria M. Skiger	1			
Ţ	ped or Printed Name			
	* * * F[LIN	G FEE: \$35.00 * * *		

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (04/13)