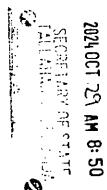
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CSC - Tallahassee CSC 1201 Hays Street Tallahassee, FL 32301-2607 850-558-1500, Ext: x62969

To: Department Of State, Division Of Corporations From: Amanda Miller - Amanda.Miller@cscglobal.com

Ext: x62969 Date: 10/29/24 Order #: 1664758-1

Re: EAGLE METAL DISTRIBUTORS, INC.

Processing Method: In-House

TO WHOM IT MAY CONCERN:

Enclosed please find:

Change of Registered Agent and Office

Check in the amount of: \$35.00 - FL State Account Number: I20000000195

Million Committee

Please take the following action:

File on a routine basis
Issue proof of filing
Return evidence to the following:
ATTN: Amanda Miller
c/o Corporation Service Company
251 Little Falls Drive
Wilmington, DE 19808

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

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

In order to change its registered office or registered agent, or both, in the State of Florida. 1. The name of the corporation: EAGLE METAL DISTRIBUTORS, INC. 2. The principal office address: 8000 Vista Reserve Blvd Ste 1100 Orlando, FL 32829 3. The mailing address (if different): 4. Date of incorporation/qualification: 09/23/2003 Document number: P03000104663 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned) Sturtz, Zachary 8000 VISTA RESERVE SUITE 1100 ORLANDO FL 32829 6. The name and street address of the new registered agent (if changed) and /or registered office of office office office office office of office office of office of office of office office of office office of office			
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/s/ Wifredo Figueras CFO Signature of an officer or director Printed or typed name and title	d agent,		
Signature of an officer or director Printed or typed name and title			
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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 perfet of my duties, and I am familiar with and accept the obligation of my position as registered agent. Of document is being filed merely to reflect a change in the registered office address, I hereby confirm corporation has been notified in writing of this change. Corporation Service Company	ormance or if this that the		
By: 10/29/2024 Signature of Registered Agent Date	10/29/2024 Date		
If signing on behalf of an entity:			
GRACE E. KIRBY, ASST. VICE PRESIDENT			
Typed or Printed Name			

* * * FILING 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)