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Division of Corporations

Fax Number : (850)617-6380

.. From:

To:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107

Fax Number : (561)214-8442

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

REGISTERED AGENT CHANGE GRAMERCY STRATEGIC CAPITAL, INC.

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

		7.0502, 607.1508, or 617.1508, Florida Statutes, organized under the laws of the State of Florida	this		
		egistered agent, or both, in the State of Florida.			
I The name of	the corporation: GRAMERCY STRA	TEGIC CAPITAL, INC.			•
		TR. #187, DELRAY BEACH, FL 33484			
3. The mailing	address (if different):				
4. Date of incor	poration/qualification: 12/08/2016	Document number: P16000096804			
	d street address of the current register rtment of State: (If resigned, enter re-	red agent and registered office on file with the signed)			
	CORPORATE CREATIONS NETWO	ORK INC.			
	11380 PROSPERITY FARMS ROAL	D #221E	₹ s	202	
	PALM BEACH GARDENS, FL 334	10		2021 JUL 20	17
6. The name an (if changed):	d street address of the new registered	agent (if changed) and /or registered office	Che MARY of STATE	20 AM	
	CORPORATE CREATIONS NETWO	ORK INC.	記して	တ္	
	801 US Highway I		100 m.	24	t I
		D. Box NOT acceptable			
	North Palm Beach, FL 33408				
The street addr	ess of its registered office and the st be identical.	reet address of the business office of its registe	red agent,		
Such change w authorized by t	as authorized by resolution duly add he board, or the corporation has bee	opted by its board of directors or by an officer s n notified in writing of the change.	0		
		Joseph Panholzer, Attorney-in-Fact			
-	ne of an officer or director	Printed or typed name and litle			
i juriner agree of my duties, ar document is ber	w i am iamiwar wiin ana accept ine	statutes relative to the proper and complete pe, obligation of my position as registered agent, in the registered office address I hereby confir.	The if this		!
	pal	July 20, 2021			
Sig	nature of Registered Agent	Date			
If signing on be	half of an entity:				
Joseph Panholze	r. Special Secretary				
ï	yped or Printed Name				
	* * * FILING	FEE: \$35.00 * * *			
	Make curewan are name	Property Decision and an arrangement			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (04/13)