P19000073607

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
				





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January 20, 2021

115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 866.625.0838 COGENCYGLOBAL.COM

Account#: 120000000088

Date:	
Name: David Shulman	
Reference #:1316631	
Entity Name:ORCHID	INVESTMENTS USA INC.
Articles of Incorporation/Authoriz	ation to Transact Business
Amendment	
✓ Change of Agent	ICCUTES CALL
Reinstatement	ISSUES? CALL David:
Conversion	850-270-0082
Merger	
☐ Dissolution/Withdrawal	
Fictitious Name	
Other	
Authorized Amount: \$35.0	2
Signature:	<u></u>



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 **866.625.0838** COGENCYGLOBAL.COM

Account#: I20000000088

Date: January 20, 2021			Account#, 12000000000			
Name: David S	Shulman					
Reference #:	1316631					
Entity Name:	ntity Name:ORCHID INVESTMENTS USA INC.					
Articles of Incorp	oration/Authoriza	ation to Transact Busine	ess			
Amendment						
✓ Change of Agent			ISSUES? CALL			
Reinstatement			David:			
Conversion			850-270-0082			
Merger						
Dissolution/Witho	drawal					
Fictitious Name						
Other						
Authorized Amount:	\$35.00					
Signature:						

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

statement of cha	provisions of sections 607.0502, 617.050 nge is submitted for a corporation orga r to change its registered office or regist	nized under the laws of the State	of Florida
1. The name of t	he corporation: ORCHID INVESTMEN'	TS USA INC.	
2. The principal	office address: #15 MAXWELL MAIN R	RD., CHRIST CHURCH, BARBAI	OOS. BB15 BB
3. The mailing a	ddress (if different):		
4. Date of incom	poration/qualification: 9/26/2019	Document number: P1900	00073607
	street address of the current registered attended to the transfer of State: (If resigned, enter resign		e with the
	LUCAS, SEAN C, ESQ.		
	777 BRICKELL AVE., #500		
	MIAMI, FL 33131		
6. The name and (if changed):	street address of the new registered age	ent (if changed) and /or registered	= = =
	COGENCY GLOBAL INC.		¥ T
	115 N. Calhoun St., STE, 4		FILE JAN 20 /
	P.O. Bo Tallahassee, Florida, 32301	ox NOT acceptable	No. 34
The street address changed will	ess of its registered office and the street be identical.	t address of the business office of	of its registered agent,
Such change wa authorized by th	is authorized by resolution duly adopte the board, or the corporation has been n	ed by its board of directors or by otified in writing of the change.	an officer so
	100	MATTHEW MACKAY - DIR	ECTOR
I further agree i of my duties, an document is bei	e of an officer of aboutor the appointment as registered agent at o comply with the provisions of all sta d I am familiar with and accept the ob ng filed merely to reflect a change in to been notified in writing of this change	tutes relative to the proper and ligation of my position as regist he registered office address, I h	complete performance
In I Trip Mond And	sistent Secretory	1/19/2021	
/s/ Eric Hood, As: Sign	nature of Registered Agent	Date	
If signing on be	half of an entity:		
COGENCY GLO	DBAL INC.		
τ	yped or Printed Name	CP. 635 00 + + +	

* * * 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)