P22000004446

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificate	s of Status		
Special Instructions to Filing Officer:				
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COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: SiteScape Technologies, Inc. Name of Corporation				
DOCUMENT NUMBER: P22000004446				
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Andrew Putch				
Name of Contact Person				
SiteScape Technologies, Inc.				
Firm/Company	,			
10 Barclay Street, Apt 16E				
Address				
New York, NY 10007				
City/State and Zip Code				
andy@sitescape.ai				
E-mail address: (to be used for future annual repo	ort notification)			
·	•			
For further information concerning this matter, please call:				
Andrew Putch	217 \\4186703			
Name of Contact Person	at (217) 4186703 Area Code & Daytime Telephone Number			
Enclosed is a \$35.00 check made payable to the Department of State.				
Mailing Address: Amendment Section	Street Address:			
	Amendment Section			
Division of Corporations	Division of Corporations			
P.O. Box 6327	The Centre of Tallahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

Tallahassee, FL 32314

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

	provisions of sections 607.0502, 617.050 ange is submitted for a corporation organ		
in orde	er to change its registered office or regist	ered agent, or both, in the State of Flo	orida.
1. The name of	the corporation: SiteScape Technolog	gies, Inc.	
2. The principal	office address: 7901 4th St N STE 30	0	
St. Petersbu	rg FL 33702		
3. The mailing a	address (if different):		
4. Date of incor	poration/qualification: 01/10/22	Document number: P220000	04446
5. The name and Florida Depa	d street address of the current registered artment of State: (If resigned, enter resign	igent and registered office on file with ed)	ı the
	James Selikoff		2022 SEC
	311 Stonebridge Ln	·	2022 MAR -7 SECRETARY
	Orange City, FL 32763		HAY -7 [
6. The name and (if changed):	d street address of the new registered age	nt (if changed) and /or registered offic	
	Registered Agents Inc.	<u>-</u>	ш —
	7901 4th St N STE 300		٠.
	St. Petersburg FL 33702	x NOT acceptable	
The street address changed will	ess of its registered office and the street be identical.	address of the business office of its	registered agent,
Such change wa authorized by the	as authorized by resolution duly adopte he board, or the corporation has been no	d by its board of directors or by an obtified in writing of the change.	fficer so
	drew Putch	Andrew Putch, CEO & Pre	
I hereby accept I further agree of my duties, an document is bei	the appointment as registered agent an to comply with the provisions of all stat all am familiar with and accept the obling filed merely to reflect a change in the sheen notified in writing of this change.	d agree to act in this capacity utes relative to the proper and comp igation of my position as registered to e registered office address I hereby	
Bee Han	mature of Registered Agent	02/28/2022	
		Date	 -
If signing on be	half of an entity:		
Bill Havre			
T	yped or Printed Name		
	* * * FILING FE	`B` • CZE AN * * *	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (04/13)