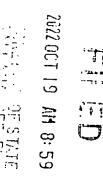
## P40763

	(Requestor's Name)
(	(Address)
	(Address)
`	(1.001005)
	(City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
	(Dunings Enthy Name)
(	(Business Entity Name)
<del></del>	(Document Number)
Certified Copies	Certificates of Status
<del></del>	
Special Instructions to	Filing Officer:

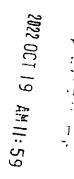
Office Use Only



900395777979



A CUTLER OCT 2 U 2022





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

Account#: I20000000088

Date: October 19, 2022	Accounts. 12000000000
Name:ERIC HOOD	
Reference #:	
Entity Name: COGENCY GLOBAL INC.	_
☐ Articles of Incorporation/Authorization to Transact Busine	ss
☐ Amendment	
✓ Change of Agent	
Reinstatement	
Conversion	
☐ Merger	
☐ Dissolution/Withdrawal	
☐ Fictitous Name	
Other	
Authorized Amount: \$\frac{\frac{1}{35}}{35}.00\$  Signature: \$\tau \text{Tic Hood}\$	
Signature: Tric Hood	

-1.212.947.7200

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

statement of cha	nge is submitted for a corpora	2, 617.0502, 607.1508, or 617.1508, Florid <mark>a St</mark> atu tion organized under the laws of the State of <mark>Dela</mark> 2 or registered agent, or both, in the State of Florid	ware	
	the corporation: COGENCY GI			<u></u>
2. The principal	office address:	8th Fl, NEW YORK, NY 10168		
3. The mailing a	address (if different):			
4. Date of incorp	poration/qualification: 10/2/199	Document number: P40763	<u>.</u>	
	d street address of the current re rtment of State: (If resigned, en	egistered agent and registered office on file with the ter resigned)	ie	
	FLORIDA FILING & SEARCE	I SERVICES, INC.		
	155 OFFICE PLAZA DR			
	TALLAHASSEE, FL 32301		2022 C	•
6. The name and (if changed):	f street address of the new regis	stered agent (if changed) and /or registered office	2022 OCT 19	4
	Eric Hood	 . 1 <sup>-</sup>	9 =	÷ 5
	115 N. Calhoun St. Ste. 4		8: 5 8: 5	·Lez
	TALLAHASSEE, FL 32301	P.O. Box NOT acceptable	ते ७	
The street addreas changed will	ess of its registered office and be identical.	the street address of the business office of its reg	gistered as	gent.
Such change was authorized by the	as authorized by resolution du he board, or the corporation ha	ly adopted by its board of directors or by an offi- is been notified in writing of the change.	cer so	
/s/Colleen	De Vries	Colleen DeVries - Senior VP		
Signatu	re of an officer or director	Printed or typed name and title		
I further agrée of my duties, ar document is bei	the appointment as registered to comply with the provisions ad I am familiar with and acce ing filed merely to reflect a ch s been notified in writing of th	l agent and agree to act in this capacity, of all statutes relative to the proper and complet of the obligation of my position as registered ag ange in the registered office address, I hereby co is change.	te perform ent. Or i onfirm tha	iance f this it the
/s/Eric Hoo	d	10/19/2022		
Sig	nature of Registered Agent	Date		
If signing on be	half of an entity:			
<del>"</del>	yped or Printed Name	 LING FEE: \$35.00 * * *		

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314