

A21 000 000 563

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

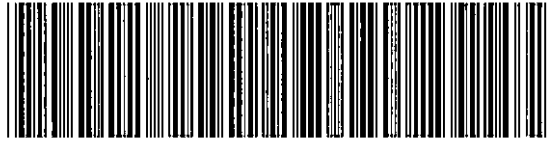
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2021 OCT 20 PM 3:23  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



**ALTRO**

US & CANADIAN ATTORNEYS, NOTARIES  
AND LEGAL COUNSEL

October 14, 2021

**BY FEDEX**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL. 32314

**RE: ORAD HOLDINGS LIMITED PARTNERSHIP**  
**Matter No. 00493**

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We would like to change the registered office and registered agent for ORAD HOLDINGS LIMITED PARTNERSHIP. Accordingly, we enclose the following:

1. Cover Letter;
2. Limited Partnership or Limited Liability Limited Partnership Statement of Change of Registered Office or Registered Agent, or Both; and
3. Cheque in the amount of USD\$35.00 payable to Florida Department of State being the requisite filing fee (please note this cheque is drawn on a US bank and is in US funds).

As this matter is time sensitive, I am hoping that you will be able to process the enclosed as soon as possible. That said, please let me know if you require any additional information to assist with this process.

Should you have any questions, please feel free to contact me at 416-477-8165.

Thanks in advance.

**ALTRO LLP**

*Ryan Robertson*

**Ryan Robertson**

*Associate B.Comm., J.D. (Canada), J.D. (USA)*

RR/yt

Encls.



FILED

LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP  
STATEMENT OF CHANGE OF REGISTERED OFFICE OR  
REGISTERED AGENT, OR BOTH

2021 OCT 20 PM 3:23

SECRETARY OF STATE

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. ORAD HOLDINGS LIMITED PARTNERSHIP

Name of Limited Partnership or Limited Liability Limited Partnership

2. 10/12/2021

Date of filing/registration in Florida

3. A21000000563

Florida document number

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

KOSTRUBA, OREST

Name

601 CASEY KEY RD.

Address

NOKOMIS, FL 34275

City, State and Zip

5. The name and Florida street address of the new registered agent and/or office:

TK REGISTERED AGENT, INC.

Name

101 E. KENNEDY BOULEVARD, SUITE 2700

Florida street address (P.O. Box not acceptable)

TAMPA FL 33602

City, State and Zip

6. Such change(s) is/are effective when filed by the Florida Department of State.

/s/Orest Kostruba - President of Exador International Inc., General Partner

Signature of General Partner

*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 performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

/S/ TERESA S. GOOD

Signature of Registered Agent

Filing Fee: \$35.00

Certified Copy (optional): \$52.50