

Florida Department of State
 Division of Corporations
 Electronic Filing Cover Sheet

M21 0000227

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000208948 3)))



H230002089483ABC3

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
 Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.
 Account Number : I20090000081
 Phone : (307)200-2803
 Fax Number : (855)330-1010

RECEIVED

2023 JUN -9 PM 1:18

DEPARTMENT OF STATE
 DIVISION OF CORPORATIONS
 TALLAHASSEE, FLORIDA

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

Email Address: _____

LLC REGISTERED AGENT CHANGE
 CANOPY FINANCIAL TECHNOLOGY PARTNERS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

2023 JUN -9 PM 2:52

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: CANOPY FINANCIAL TECHNOLOGY PARTNERS, LLC

2. (a) _____ Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) <u>1 Research Court Suite 450</u> <u>Rockville MD 20850</u> <u>01/07/2021</u>	(b) _____ Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) <u>1 Research Court Suite 450</u> <u>Rockville MD 20850</u> <u>M21000000227</u>
---	---

3. 01/07/2021 Date of filing/registration in Florida 4. M21000000227 Document number

5. (a) CAPITOL CORPORATE SERVICES, INC.
 Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
515 EAST PARK AVENUE 2ND FL
 Registered Office Address **(MUST BE FLORIDA STREET ADDRESS)**

TALLAHASSEE, FL 32301

(b) Registered Agents Inc
 Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:
7901 4th St N
NEW Registered Office Address:
STE 300

St. Petersburg, FL 33702

2023 JAN 19 PM 2:52

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

<u><i>Robin Jones</i></u> Signature of a member or authorized representative of a member	<u>Robin Jones</u> Printed or typed name of signer
---	---

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 as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

David Roberts David Roberts - Assistant Secretary
 Signature of Registered Agent