

Florida Department of State
Division of Corporations
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MO9000000562

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

From: Account Name : CORPORATE CREATIONS INTERNATIONAL INC.
Account Number : 110432003053
Phone : (561)694-8107
Fax Number : (561)214-8442

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
RIALTO PARTNERS GP, LLC

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

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

1. The name of the limited liability company is: RIALTO PARTNERS GP, LLC

2. (a) Principal office address of the limited liability company: 700 N.W. 107TH AVENUE
SUITE 400
MIAMI FL 33172

(Note: MUST BE STREET ADDRESS)

(b) Mailing address of limited liability company: 700 N.W. 107TH AVENUE
SUITE 400
MIAMI FL 33172

(Note: MAY BE POST OFFICE BOX)

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3. Date of filing/registration in Florida 4. Document number

5.(a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
CORPORATE CREATIONS NETWORK INC.

Registered Agent:

Registered Office Address: 801 US HIGHWAY 1

NORTH PALM BEACH, FL 33408

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address:**

NEW Registered Agent: CT CORPORATION SYSTEM

NEW Registered Office Address: 1200 SOUTH PINE ISLAND ROAD

(MUST BE FLORIDA STREET ADDRESS)

PLANTATION FL 33324

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.

[Signature]
(Signature of a member or authorized representative of a member)

Nicholas Nichols, Attorney-in-Fact
(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.

[Signature] Nicholas Nichols, Special Secretary
(Signature of Registered Agent)

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

INHS18(10/99)
Corporate Creations International
801 US Highway 1
North Palm Beach FL 33408
(561) 694-8107

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