## P0500164213

(Requestor's Name)				
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O9 DEC 28 AM II: OL SLORE TARY OF STATE TALLAHASSEE, FI ORIGINA



December 22, 2009

Division of Corporations P.O. Box 6198 Tallahassee, FL 32314

RE: AD Private Equity, Inc.

Dear Sir/Madam:

Enclosed please find a Statement of Change of Registered Office, along with the required filing fee in the amount of \$35.00 for the above referenced entity.

If you should have any questions, please feel free to contact me.

Sincerely,

Celeste A. Stellabott Legal Department

**Enclosure** 

## **COVER LETTER**

TO:	Amendment Se Division of Cor					
SUBJE	ССТ:	AD Private   Name of	Equity, Inc.			
		Name of	Corporation			
DOCU.	MENT NUMBI	ER:P0	50000164213	<del></del>		
The end	closed Statement	of Change of Registered Of	fice/Agent and fee are submitte	ed for filing.		
Please 1	return all corresp	ondence concerning this mat	ter to the following:			
		Celeste	A. Stellabott			
		Name of 0	A. Stellabott Contact Person			
		•				
		Susquehanna Inte	ernational Group, LLP			
			Company			
			<b>,</b>			
		401 City Av	onuo Suito 220			
			enue, Suite 220 ddress	<del></del>		
		71	uui 033			
	Bala Cynwyd, PA 19004  City/State and Zip Code					
		City/State	and Zip Code			
	celeste stellahott@sig.com					
celeste.stellabott@sig.com  E-mail address: (to be used for future annual report notification)						
		·	-			
For fur	For further information concerning this matter, please call:					
	Celest	te A. Stellabott	at ( 484 )	562-1255		
	Name of	f Contact Person	at ( <u>484</u> ) Area Code & Daytin	ne Telephone Number		
Enclosed is a \$35.00 check made payable to the Department of State.						
		Mailing Address:	Street Address:			
		Amendment Section	Amendment Sec			
		Division of Corporations	Division of Cor	•		
		P.O. Box 6327	Clifton Building	-		
		Tallahassee, FL 32314	2661 Executive			
			Tallahassee, FL	. 32301		

TO:

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Flor ange is submitted for a corporation organized under the laws of the State er to change its registered office or registered agent, or both, in the State	of Florida
1. The name of	the corporation: AD Private Equity, Inc.	
	office address: 1515 N. Federal Highway, Suite 300, Office #	<sup>‡</sup> 29
	Boca Raton, FL 33432	
3. The mailing a	address (if different):	
4. Date of incorp	poration/qualification: 12/16/2005 Document number:	P05000164213
	I street address of the current registered agent and registered office on filtment of State: (If resigned, enter resigned)	e with the
	Autumn Nesbeth, c/o SIG	
	1515 N. Federal Highway, Suite 300, Office #29	
	Boca Raton, FL 33432	
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered	d office ORIDA
	555 South Federal Highway, Suite 400	
	P.O. Box NOT acceptable	
	Boca Raton, FL 33432	
The street address changed will	ess of its registered office and the street address of the business office be identical.	of its registered agent,
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or be board, or the corporation has been notified in writing of the change	y an officer so
Signatur	Brian Sullivan, Printed or typed name	Treasurer
I further agree i of my duties, an document is bei	the appointment as registered agent and agree to act in this capacity to comply with the provisions of all statutes relative to the proper and d I am familiar with and accept the obligation of my position as regis ng filed merely to reflect a change in the registered office address, I have been notified in writing of this change.	complete performance tered agent. Or, if this vereby confirm that the
Jen y	Lesbert 12/4/09	
	half of an entity:	
T	yped or Printed Name	
	* * * FILING FEE: \$35.00 * * *	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)