## I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered. 02/22/2019

SIGNATURE: JOSHUA WITHERILL

Electronic Signature of Signing Authorized Person(s) Detail

# DOCUMENT# L16000124413

#### Entity Name: SEVEN NORTH CAPITAL PARTNERS LLC

#### **Current Principal Place of Business:**

15611 MILAN CT WELLINGTON. FL 33414

## **Current Mailing Address:**

15611 MILAN CT WELLINGTON, FL 33414 US

#### FEI Number: 81-3219304

#### Name and Address of Current Registered Agent:

WITHERILL, JOSHUA 15611 MILAN CT WELLINGTON, FL 33414 US

FILED Feb 22, 2019 Secretary of State 6997179791CC

Certificate of Status Desired: No

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

## SIGNATURE:

Electronic Signature of Registered Agent

# Authorized Person(s) Detail :

Title	AMBR	Title	AMBR
Name	JOSHUA, WITHERILL	Name	KOCHUBA, BRENT
Address	15611 MILAN CT	Address	1084 FAIRFIELD BEACH ROAD
City-State-Zip:	WELLINGTON FL 33414	City-State-Zip:	FAIRFIELD CT 06824

AUTHORIZED MEMBER

Date

Date