A0900000441

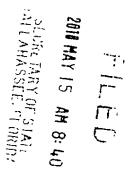
(Req	uestor's Name)	
(Addi	ress)	
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(City/	/State/Zip/Phon	e #)
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PICK-UP	WAIT	MAIL
(Busi	iness Entity Na	me)
(Doc	ument Number)
Certified Copies	Certificate	s of Status
Special Instructions to F	iling Officer:	





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COVER LETTER

TO: Registration Section				
Division of Corporations				
SUBJECT: Granite Private	e Equity Inves	stments, LLLP		
Name of Limited Partnership	or Limited Liability	y Limited Partnership		
DOCUMENT NUMBER:	A0900000441			
The enclosed Statement of Change of Regis fee(s) are submitted for filing.	stered Office and	or Registered Agent and		
Please return all correspondence concerning	g this matter to:			
Donna Colavito				
Contact Person				
Granite Associates, Inc.				
Firm/Company				
225 Banyan Boulevard, Suite	e 130			
Address				
Naples, FL 34102				
City, State and Zip Code				
dcolavito@granitelp.d	com			
E-mail address: (to be used for future annual re				
For further information concerning this mat	tter, please call:			
Louis J. Boyd	at (239	228-6505		
Name of Contact Person		d Daytime Telephone Number		
Enclosed is a \$35.00 check made payable to	o the Florida Dep	partment of State.		
STREET ADDRESS:	MAILI	NG ADDRESS:		
Registration Section	Registration Section			
Division of Corporations	Division of Corporations			
Clifton Building		ox 6327		
2661 Executive Center Circle	Tallaha	ssee, FL 32314		
Tallahassee, FL 32301				

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

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	Granite Private Equity	/ Investme	ents, LLLF	o	
Nan	ne of Limited Partnership or Limit	ted Liability L	imited Partners	hip	
_{2.} Jur	ne 25, 2009	3.	A09000	0000441	
Date of filing/	Date of filing/registration in Florida Florida document number				
4. The name of the reg Department of State:	gistered agent and the registered of	ffice address a	s shown on the	records of the Florida	
	United Corporate	Services, I	nc.		
•	Name				
	9200 South Dadelan	d Blvd, Sui	te 508		
	Addres	55			
	Miami, FL	33156			
	City, State a	nd Zip		ž., 2 2	
5. The name and Flori	da street address of the new regist	ered agent and	l/or office:	BIB MAY 15 Siurliais ailahasse	
	Granite Assoc	iates, Inc.			
	Name	•			[
	225 Banyan Boulev	/ard, Suite	130	01.5	ſ
	Florida street address (P.O	. Box not acce	ptable)	8: 40 1916 1916	(
	Naples	FL	34102	<u> </u>	
•	City, State a				
6. Such change(s) is/a General Partner: Granito	re effective when filed by the Flor c Growth 196, LLC	ida Departmer	nt of State.		
Signature of General P	armer Adam Gerry, Manager				
comply with the provis	pointment as registered agent and ions of all statutes relative to the pan accept the obligations of my pan	proper and cor	mplete perform	I further agree to ance of my duties,	
Signature of Registered	d Agent				
Filing Fee:	\$35.00				

Certified Copy (optional): \$52.50