B06000000 421

(Requestor's Name)					
(Address)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificates	of Status			
Special Instructions to Filing Officer:					





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COVER LETTER

TO:	Registration Section Division of Corporations			
	•			
SUBJ	JECT: Dern's Market Opportunity Fund, L.P	·		
	Name of Limited Partnership	or Limited Liabilit	y Limited Partnership	
DOC	UMENT NUMBER:			
	nclosed Statement of Change of Regist are submitted for filing.	ered Office and	or Registered Agent and	
Please	e return all correspondence concerning	this matter to:		
Mark F	R. Dern			
	Contact Person			
Dem's	Market Opportunity Fund, L.P.			
	Firm/Company			
4417 V	Voodfield Boulevard			
	Address			
Boca R	taton, FL 33434			
	City, State and Zip Code			
mark@	derncapital.com			
E	-mail address: (to be used for future annual rep	port notification)		
For fu	rther information concerning this matte	er, please call:		
Mark R	R. Dern	at (<u>561</u>	883-0740	
	Name of Contact Person		d Daytime Telephone Number	
Enclos	sed is a \$35.00 check made payable to	the Florida Dep	artment of State.	
	ıg Address:	Street A	Address:	
	ration Section	Registration Section		
	on of Corporations	Division of Corporations		
	30x 6327	The Centre of Tallahassee		
Lallah	assee, FL 32314	2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

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.

Dern's M	Iarket Opportunity F	und, L.P.	
	Name of Limited Partnership or Lin	nited Liability Limited Partnership	
2.10/20/20	06	_{3.} B06000000421	
Date of filing/registration in Florida		Florida document number	
4. The name of the Department of Sta		office address as shown on the record	s of the Florida
	Mark R. Dern		
	Nar		
	7777 Glades Road	l, Suite 207A	• • •
	Addı	css	-
	Boca Raton, FL 3	3434	
	City, State	and Zip	Č
5. The name and Florida street address of the new registered agent and/or office:		stered agent and/or office:	- ,
	Mark R. Dern		<u>က</u> က
	Nar	ne	in en
	4417 Woodfield H	Boulevard	C
	Florida street address (P.	O. Box not acceptable)	
	Boca Raton	_{FL} 33434	
	City, State		
6. Such change(s)	is/are effective when filed by the Flo	orida Department of State.	_
MILIA	Part Let & Mate + 9	form time the General &	arthur of Valley
Signature of Gener	ral Partner Manager	IP The General Parties	of Dein's Mukat
and I am familiar v	with an accept the obligations of my	L.P. The General Portugues of the desired agree to act in this capacity. I furth proper and complete performance of position as registered agent.	er agree to Fm1, L.P.
Signature of Regis	tered Agent		
Filing Fee:	\$35.00		

Certified Copy (optional): \$52.50