P16000

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

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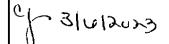
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ALI AHASSEE, FLU-



CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195				
REFERENCE : 520731 8400440				
AUTHORIZATION: Expellera				
COST LIMIT : \$ 35.00				
ORDER DATE : February 23, 2023				
ORDER TIME : 9:06 AM				
ORDER NO. : 520731-079				
ORDER NO. : 520/31-0/9				
CUSTOMER NO: 8400440				
CHANGE OF AGENT				
NAME AND DEC CARTES A LO				
NAME: ANTARES CAPITAL LP				
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:				
CERTIFIED COPY				
XX PLAIN STAMPED COPY				
CONTACT PERSON: Eyliena Baker				
EXAMINER'S INITIALS:				

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. ANTARES CA	PITAL LP			
	Name of Limited Partnership or Lir	·)	
2. 08/05/2015		3. B15000000214		
		Florida documen	it number	
4. The name of the Department of Stat	e registered agent and the registered e:	office address as shown on the rec	cords of the Florida	
	C T CORPORATION SYSTE	EM		
	Name		·. ~	
	1200 SOUTH PINE ISLAND ROAD			
	Add	ress	023 TA	
	PLANTATION, FL 33324			
	City, State	and Zip	λ - ω	
5. The name and F	florida street address of the new reg	istered agent and/or office:	: :	
	Corporation Service Compar	ıy	SE FL	
	Nai	ne		
	1201 Hays Street		, , ,	
	Florida street address (P.	O. Box not acceptable)		
	Tallahassee	FL ³²³⁰¹		
	City. State			
6.) Such change(s)	is/are effective when filed by the Fl	orida Department of State.		
Kin Ž	C_{0}	•		
Signature of Genera	al Partner			
	sident on behalf of Antares Capital	GP, LLC		
	appointment as registered agent ar			
	ovisions of all statutes relative to the		æ of my duties.	
ana i am familiar w	with an accept the obligations of my	position as registered agent.		
<u>Llrace</u>	· Cokuble			
Signature of Regist	ered Agent			
Grace E. Kirby, As	sst. Vice President			
Filing Fee:	\$35.00			

Certified Copy (optional): \$52.50