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Division of Corporations



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Division of Corporations

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## 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.

| i   | ANTARES II                                      | OLDINGS LP                           |                         |                            |                          |
|---|---|--------------------------------------|-------------------------|----------------------------|--------------------------|
| Name of Limite  | d Partnership or Lin                            | rited Liability I                    | imit                    | ed Partner                 | ship                     |
| 01/18/2017  | 01/18/2017                                      |                                      | B17000000016            |                            |                          |
| Date of filing/registration in Florida  |   |                                      | Florida document number |                            | ment number              |
| 4. The name of the registered ager<br>Department of State:  | nt and the registered                           | office address a                     | ag sh                   | own on the                 | e records of the Florida |
|   | Registered Agen                                 | t Solutions, Inc.                    |                         |                            |                          |
|   | Nar   | nc                                   |                         |                            |                          |
|   | 155 OFFICE PLAZ                                 | ZA DR, SUITE                         | Α                       |                            | _                        |
| <u></u>   | Addi  | ress                                 |                         |                            |                          |
|   | Tallahassee, FL 32301                           |                                      |                         |                            |                          |
|   | City, State                                     | and Zip                              |                         |                            | 三 三 三 三                  |
| 5. The name and Florida street add  | dress of the new reg                            | istered agent an                     | Фor                     | office:                    | 23                       |
|   | С Т Согрога                                     | tion System                          |                         |                            | 世界 夏 5                   |
| <del></del>   | Nai   | nc                                   |                         |                            | 710                      |
|   | 1200 South Pin                                  | e Island Road                        |                         |                            | RIE 5                    |
| Flor  | ida street address (P                           | O. Box not acc                       | eptal                   | ble)                       | 7 O                      |
| •   | Plantation,                                     | FI                                   | 1.                      | 33324                      |                          |
|   | City, State                                     | FI<br>e and Zip                      | J                       |                            | •                        |
| 6. Such change(s) is/are effective  |   |                                      |                         | f State.                   |                          |
| Ranie Swe   | 4   |                                      |                         |                            |                          |
| Signature of General Partner  |   |                                      |                         |                            |                          |
| Bormie Severin, Vice Presi<br>I hereby accept the appointment a<br>comply with the provisions of all s<br>and I am familiar with an accept to | s registered agent ar<br>tatutes relative to th | nd agree to act :<br>e proper and co | in th.<br>omple         | is capacity<br>ete perfort | . I further agree to     |
| Signature of Registered Agent   |   |                                      |                         |                            |                          |
| Mike Jones Assistant Sec  | retary  |                                      |                         |                            |                          |
| Filing Fee:   | \$35.00   |                                      |                         |                            |                          |
| Certified Copy (optional):  | \$52.50   |                                      |                         |                            |                          |