

B19000000260

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

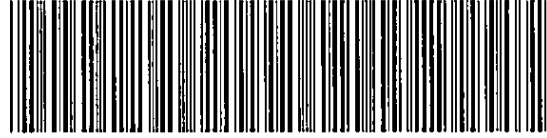
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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WALK IN

PICK UP: 12/11/2019

- CERTIFIED COPY** _____
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- CUS** _____
- FILING** CORRECTION _____

1. **ARAGON GLOBAL MANAGEMENT LP**
(CORPORATE NAME AND DOCUMENT #)
2. _____
(CORPORATE NAME AND DOCUMENT #)
3. _____
(CORPORATE NAME AND DOCUMENT #)
4. _____
(CORPORATE NAME AND DOCUMENT #)
5. _____
(CORPORATE NAME AND DOCUMENT #)
6. _____
(CORPORATE NAME AND DOCUMENT #)

SPECIAL INSTRUCTIONS: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ARAGON GLOBAL MANAGEMENT LP
Name of Limited Partnership or Limited Liability Limited Partnership

The enclosed Statement of Correction and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Kennedy McCann
Contact Person
Seward & Kissel LLP
Firm/Company
One Battery Park Plaza, 24th Floor
Address
New York, New York 10004
City, State and Zip Code
todd.trabold@aragonglobal.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kennedy McCann at (212) 574-1664
Name of Contact Person Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

- \$52.50 Filing Fee
- \$61.25 Filing Fee and Certificate of Status
- \$105.00 Filing Fee and Certified Copy
- \$113.75 Filing Fee, Certified Copy, and Certificate of Status

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**STATEMENT OF CORRECTION
FOR
FLORIDA OR FOREIGN LIMITED PARTNERSHIP
OR
LIMITED LIABILITY LIMITED PARTNERSHIP
ARAGON GLOBAL MANAGEMENT LP**

Insert name currently on file with Florida Department of State

B19000000260

Florida Document Number of Limited Partnership or Limited Liability Limited Partnership

Pursuant to the provisions of section 620.1207, Florida Statutes, this limited partnership or limited liability limited partnership submits the following statement of correction.

FIRST: The reason for filing this statement of correction is:

- The record contained false or erroneous information.
- The record was defectively signed.

SECOND: This statement corrects LIMITED PARTNERSHIP

Specify document type being corrected
October: 15, 2019

filed with the Florida Department of State on

Insert date document filed with Dept. of State

THIRD: The false or erroneous information or defect is as follows:

Principal Office / Mailing Address

9010 Strada Stell Court

Suite 105

Naples, FL 34019

FOURTH: The false or erroneous information or defect is corrected as follows:

Principal Office / Mailing Address

1792 Bell Tower Lane

Weston Florida, 33326

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Signature of a general partner*:

(*Note: If adding or deleting an election to be a limited liability limited partnership statement, all general partners must sign. If adding additional general partner(s), the new general partner(s) must sign).

DocuSigned by:
Anne Das Griffin
3D19F54C789444D

Signature(s) of **new** general partner(s), if any:

Signature of new registered agent, if applicable :(NOTE: if correcting the registered agent, the new registered agent must sign accepting the designation below)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Signature of Registered Agent

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Filing Fee: \$52.50
Certified Copy (optional): \$52.50
Certificate of Status (optional): \$8.75