Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CAPITOL SERVICES, INC.

Account Number : I20160000017 Phone : (855)498-5500 Fax Number : (800)432-3622

Enter the email address for this business entity to be used for future amount report mailings. Enter only one email address please.

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Email Address:

REGISTERED AGENT CHANGE **CLEMATIS BANYAN INVESTORS LP**

Certificate of Status	0
Certified Copy	1
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Estimated Charge	\$87.50

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A. LUNT

COVER LETTER

TO:	Registration Section Division of Corporations			
CITO	FECT: Clematis Banyan Investors LP			
SUD	Name of Limited Partnership or Limited Liabili	ty Limited Partnership		
DOC	UMENT NUMBER:			
	enclosed Statement of Change of Registered Office and are submitted for filing.	Vor Registered Agent and		
Please	e return all correspondence concerning this matter to:			
Christ	ina T. Rodriguez			
	Contact Person	•		
c/o Ha	aynes and Boone, LLP			
	Firm/Company	-		
2323	Victory Avenue, Suite 700			γVIC.
	Address	-	21	ISEC 335
Dallas	s, Texas 75219			- - - - - - - - - - - - - -
	City, State and Zip Code	-	$\overline{\omega}$	T R
adam(@midnightholdings.com		7	유유 유유
E	E-mail address: (to be used for future annual report notification)	 _	:2	9,4
Fo r fi	urther information concerning this matter, please call:		: 02	ATION
∧dam	C. Demark at (917) 514.6546		S
		nd Daytime Telephone Number		

Enclosed is a \$35.00 check made payable to the Florida Department of State.

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

INHS04 (01/06)

Filing Fee:

Certified Copy (optional): \$52.50

\$35.00

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. Clematis Ban	yan Investors LP			
Nam	ne of Limited Partnership or Lim	nited Liability Limited Partnership		
2, April 29, 202	il 29, 2021 3 _. B21000000177			
Date of filing/	registration in Florida	Florida document number		
4. The name of the reg Department of State:	gistered agent and the registered	office address as shown on the records of the Flo	orida	
	Adam Demark			
•	Nan	ne		
	440 Royal Palm Way	, Suite 100		
-	Addr	ess		
	Palm Beach, Florida 3	33480		
•	City, State	and Zip		9
5. The name and Florid	da street address of the new regi	stered agent and/or office:	21	SEC
	Adam C. Demark		1 JUL 13	오ဣ
-	Nam	nc		무닭
	340 Royal Poinciana	Way, Suite 317-383	PH	C02
-	Florida street address (P.	O. Box not acceptable)		50 d
	Palm Beach	_{FL} 33480	2: 02	ZATIAT
- -	City, State	and Zip	.0	ONS.
/s/ Adam C. Demark, By: BA Clematis Bar Signature of General P I hereby accept the app	pointment as registered agent an	an, LP oct ad agree to act in this capacity. I further agree to	,	
	ions of all statutes relative to the an accept the obligations of my	e proper and complete performance of my duties, position as registered agent.		
/s/ Adam C. Demark Signature of Registered	i Agent	July <u>9</u> , 2021		

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