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(((11240002208483)))



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (614)573-3996

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

Email Address:

BLACKSTONE ADMINISTRATIVE SERVICES PARTNERSHIP L.P.

Certificate of Status

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Certificate of Status	0
Certified Copy	1
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K. SALY

JUN 2 7 2024

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AMENDMENT TO CERTIFICATE OF AUTHORITY SELECTION OF ALLAHASSES FLORIDA

	BILITY LIMITED PARTNERSHIP	Z OK!
	imited liability limited partnership as it appea	rs on the records of
the Florida Department of State is: BLACKSTONE ADMINISTRATIVE SERV	VICES PARTNERSHID I D	
THE TOTAL PROPERTY OF THE SERVICE SERV	TOEST ARTHERSTIFF C.F.	<del> </del>
2. Document Number of Foreign Limited P B21000000210	artnership or Limited Liability Limited Partne	ership: _ `
2. The jurisdiction of its formation is: DE	<del></del>	
3. The date the entity was authorized to tra	nsact business in Florida is: 5/17/2021	<del></del>
4. If the amendment changes the name of t the new name:	he limited partnership or limited liability limit	ted partnership, enter
Acceptable Limited Partnership suffixes; Limited Acceptable Limited Liability Limited Partnership s	Parmership, Limited, L.P., LP, or Ltd. ouffixes: Limited Liability Limited Partnership, L.L.L.	.P. or LLLP.
(If name unavailable in Florida, enter alterr Florida.)	nate name adopted for the purpose of transacti	ng business in
5. If the amendment changes the general paners:	artner(s), list the name and business address of Business Address;	f each general partner:
Schwarzman, Stephen A.	345 Park Avenue Suite 1100	Add
•	New York, NY 10154	Remove Change
Gray, Jonathan D	345 Park Avenue Suite 1100	∏Add
	New York, NY 10154	Remove Change
James, Hamilton E	345 Park Avenue Suite 1100	Add
	New York, NY 10154	Remove Change
Finley, John G	345 Park Avenue Suite 1100	Add
	New York, NY 10154	Remove Change
Chae, Michael	345 Park Avenue Suite 1100	Add
	New York, NY 10154	Remove Change
Striano, Christopher	345 Park Avenue Suite 1100	——— € ∏Add
	New York, NY 10154	Remove Change

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6. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:  All 2:  6. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:	42 E Dr.
7. If the amendment corrects any false statement listed in the application, indicate the statement being corrected and the correction:	
8. If the amendment is to add or delete an election to be a limited liability limited partnership statement, check the appropriate box:	
The entity elects to be a limited liability limited partnership.	
The entity is no longer a limited liability limited partnership.	
9. Attached is an original certificate, no more than 90 days olds, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.	
10 Effective date, if other than the date of filing:  (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing)	
<b>Note</b> : If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.	
Signature of a general partner: Tabas Hai	
Typed or printed name: Tabea IIsi as authorized signatory for Blackstone Fioldings I - SUB GP L.L.C., the general partner	
Filing Fee: \$52.50 CertifiedCopy(optional): \$52.50 Certificate of Status (optional): \$8.75	
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*j.*:

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Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "BLACKSTONE ADMINISTRATIVE SERVICES

PARTNERSHIP L.P." IS DULY FORMED UNDER THE LAWS OF THE STATE OF

DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR

AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FIFTH DAY OF

JUNE, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

TALLAHASSES FLORID

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SR#\_20242980691
You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 203792810

Date: 06-25-24