TCHI ABVISORS, L.P. Principal Place of Business Mailing Address 28 STATE STREET. 37TH FLOOR BOSTON MA 02109 SECRETARY OF STATE TALLAHASSEE, FLORIDA 2. Principal Place of Business Suite, Apt. #, etc. City & State City &	DOCUMENT	# B980	00000731	•,	
### Address (PO Box Number is Not Acceptable) ### Acceptable	1. Entity Name TCI-II ABVISORS. L.			C 11	ED
28 STATE STREET. 37TH FLOOR BOSTON MA 02109 28 STATE STREET. 37TH FLOOR BOSTON MA 02109 28 STATE STREET. 37TH FLOOR TALL AHASSEE, FLORIDA A FEI Number City & State City & State Desired Agent 7. Name and Address of New Registered Agent 7. Name and Address of New Registered Agent Name Service Address (P.O. Box Number is Not Acceptable) City FL Zip Code City FL Zip Co					
Suite, Apt. 4, etc. City & State City & State City & State Country Zip Country S. Certificate of Status Desired Sta	rincipal Place of Busines	SS	Mailing Address	01 MAY -2	2 PM 12: 3b
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Zip Country Zip Country 5. Certificate of Status Desired	City & State		City & State		U 64-2470557
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 City FL Zip Code The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. GRATURE Signature, hipseld or pintor hame of registered agent and tise if applicable. (NOT Registered Agent synature required when retreating) A CATE Capital Contributions as Shown on record. A GENERAL PARTNER THAT IS A BUSINESS IN TITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on te form; an amendment must be filled to change a general partner. GENERAL PARTNER INFORMATION THE ADDRESS CHANGES ONLY STREET ADDRESS CITY-ST-ZP	Zip	Country	Zip	Country	5. Certificate of Status Desired \$8.75 Additional
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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER