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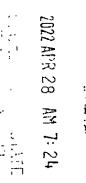
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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Meghan Groom meghan.groom@cscglobal.com

Date: April 23, 2021

Order#: 774946/041

Re: PARTICIPANT CAPITAL, LLC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$\$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX ___ Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Meghan Groom

c/o Corporation Service Company

251 Little Falls Drive Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1.	Na	me of the limited liability company: PARTICIPANT C	APITAL	., LLC.	
2	(a)	1010 NE 2ND AVE	(b	1010 NE	E 2ND AVE
	()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (*	· / 	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		MIAMI, FL 33132	_	MIAMI, F	FL 33132
		09/20/2010		L1000009	98037
	(a)	Date of filing/registration in Florida MOISES, SERGIO	4.		Document number
	(4)	Registered Agent and Registered Office shown on the records of the 1010 NE 2ND AVE	ne Florida	Dept. of Sta	2022 APR
		Registered Office Address (MUST BE FLORIDA STREET A	DDRESS	2	- 28 28
		MIAMI	33132		AH 7: 24
	(b)			dress:	·
		NEW Registered Office Address:		· · · · · · · · · · · · · · · · · · ·	_
		1201 Hays Street			_
		Tallahassee FL_	32301		_
cha age wa	inge m w s/we	mited liability company is not organized under the laws or changes are made, the Florida street address of the raill be identical. Or, in the case of a Florida limited liabre authorized by an affirmative vote of the members of ces of organization or the operating agreement of the li	egistere oility co the lim	d office ar mpany, it i ited liabili	nd the business office of the registered s hereby confirmed that the change(s) by company or as otherwise provided in
		Xiel & Coner	Jill C	Cilmi, Auth	orized Person
Signat		ure of a member or authorized representative of a member			Printed or typed name of signee
I h pro the to i noi	iere (ovisid obli nere	by accept the appointment as registered agent and agree on of all statutes relative to the proper and complete pigations of my position as registered agent as provided by reflect a change in the registered office address, I he writing of this change.	e to act erforma for in C ereby co	in this cap ince of my hapter 60: nfirm that	acity. I further agree to comply with the duties, and I am familiar with and accept 5. F.S. Or, if this document is being filed the limited liability company has been
Sig	natur	e of Registered Agent	Grace	E. Kirby,	Asst. Vice President