M06000003565

(Requestor's Name)				
(Address)				
(Address)				
· (Ci	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				





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05/28/15--01028--010 **25.00

15 M/Y 28 AM 9: 14

JUN 5 2015 C LEWIS



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Janis M. Smith janis.smith@cscglobal.com

Date: May 26, 2015

Order#: 630558-028

Re: GENCOM ASSET MANAGEMENT GP, L.L.C.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.

Please take the following action:

XX File in your office on a routine basis.

XX___ Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Janis M. Smith

c/o Corporation Service Company
2711 Centerville Road, Suite 400

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

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

QUCA.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: GENCOM AS	SET MANAGE	MENT GP, L.L.C.
2. (a	1)	255 Alhambra Circle, Suite #600 Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		Coral Gables, FL 33134		
2		06/26/2006	 . 	6000003565
3.		Date of filing/registration in Florida	4.	Document number
5. (a)	C T Corporation System		
		Registered Agent and Registered Office shown on the records	of the Florida Dept	. of State:
		1200 South Pine Island Road		
		Registered Office Address	T ADDRESS)	
				
		Plantation, I	FL 33324	
(t) .	Corporation Service Company Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>	ed Office address:	28 AM
		1201 Hays Street		9: 15: 1 7: 7: 7: 7: 7: 7: 7: 7: 7: 7: 7: 7: 7:
		NEW Registered Office Address:		
		Tallahanan		
		Tallahassee , F	FL 32301	
the cagent agent was/	hai we	mited liability company is not organized under the large or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited re authorized by an affirmative vote of the members eles of organization or the operating agreement of the	of the registered liability compar s of the limited I	d office and the business office of the registered ny, it is hereby confirmed that the change(s) liability company or as otherwise provided in
_			Dona Pri	ebe, Authorized Person
Sig	nati	are of a member or authorized representative of a member		Printed or typed name of signee
provi the o to me notifi	sic bli ere ed	y accept the appointment as registered agent and a pass of all statutes relative to the proper and complet gations of my position as registered agent as providly reflect a change in the registered office address, in writing of this change.	te performance led for in Chapt I hereby confirm	of my duties, and I am familiar with and accept er 605, F.S. Or, if this document is being filed n that the limited liability company has been
Signa	tur	of Registered Agent Corporation Service Company	BY: Sylvia	Queppet, Asst. Vice President

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00