## M180000 11393

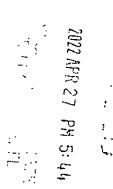
(Requestor's Name)						
(Address)						
•						
(4 ddaga)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Dusiness Futity Name)						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						





900363422299

04/27/21--01031--007 \*\*25.00



O SIWWONS



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#: 774946-034

Re: PARTICIPANT CAPITAL PARTNER DEBT, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$525.00.

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: Meghan Groom

c/o Corporation Service Company

251 Little Falls Drive 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: PARTICIPANT C.	APITAL	_ F	PARTNER [	DEBT, LLC	
2. (	a)	1010 NE 2ND AVENUE	(h	5)	1010 NE 2	ND AVENUE	
~. (	(a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ ("	·' ) .	M	ailing address of limited liability company; (Note: MAY BE POST OFFICE BOX)	
		MIAMI, FL 33132	_	-	MIAMI, FL	33132	
		12/18/2018		M18000011393			
<ol> <li>3.</li> <li>5.</li> </ol>		Date of filing/registration in Florida MOISES, SERGIO	4.		D	ocument number	
· 1		Registered Agent and Registered Office shown on the records of the Florida Dept. of State 1010 NE 2ND AVENUE					
		Registered Office Address (MUST BE FLORIDA STREET AL	ODRESS	<u>2</u> 2		2021 APR 27	
		MIAMI, FL. 3	3132				
(	b) .	Enter name of NEW Registered Agent and/or NEW Registered Office address:  Corporation Service Company				PH 5: 14	
		NEW Registered Office Address:					
		1201 Hays Street					
		Tallahassee, FL_	2301				
char agen was/	ige it w wei	mited liability company is not organized under the laws or changes are made, the Florida street address of the revill be identical. Or, in the case of a Florida limited liab realthorized by an affirmative vote of the members of clerof organization or the operating agreement of the line.	gistere ility coa the lim mited li	ed mj ito ial	office and t pany, it is h ed liability o	he business office of the registered ereby confirmed that the change(s) company or as otherwise provided in any.	
Signature of a member or authorized representative of a member					Printed or typed name of signee		
prov the c to m	visio obli <sub>j</sub> ere	y accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete perguions of my position as registered agent as provided for reflect a change in the registered office address. I here in writing of this change.	erforma for in C reby co	me he mf	ce of my du apter 605, F firm that the	iv. I further agree to comply with the ties, and I am familiar with and accept is. Or, if this document is being filed limited liability company has been Asst. Vice Presidenty	
Sign	atur	e of Registerell Agent					

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