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LLC REGISTERED AGENT CHANGE GENROCK CAPITAL MANAGEMENT GP, LLC

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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.

l.	Na	ime of the limited liability company: GenRock C	Capital Manage	me	ent GP, LLC			
ר	(a)	e/o GenRock Capital Management, LP		(b)	c/o GenRock Capital Mana	gemen	n, LP	
	(41	Principal office address of limited liability compa- (Note: MUST BE STREET ADDRESS)		(0)	Mailing address of (Note: MAY BE		-	
		214 Brazilian Avenue, Suite 101			214 Brazilian Avenue, Suite	: 101		
		Palm Beach, FL 33480			Palm Beach, FL 33480			
		02/28/2019		Ņ	м19000002093			
3.		Date of filing/registration in Florida	4.	_	Document nun	iber		
5	(a)							
٥.	(41	Registered Agent and Registered Office shown on the rec Matthew Ailey	ords of the Fion	da 1	Dept. of State:			
		Registered Office Address (MUST BE FLORIDA ST	REET ADDRE	<u>SS)</u>	<u></u>			
		231 Royal Palin Way, Ste 302			•	1	~>	
		Palm Beach	FL 33480			•	ر اري	4
							2	
	(b)	Enter name of NEW Registered Agent and/or NEW Reg	ristered Officer	uld				
		The fame of the Manager and the transfer	I.M. (V. G.	11.12	1717.		-	á
		Matthew Ailey					<u>. 7</u>	
		NEW Registered Office Address:					~2	
		214 Brazilian Avenue, Suite 101						
			77.400					
		Palm Beach	, FL33480					
the ag wa the	e cha ent v as/w e art	imited liability company is not organized under inge or changes are made, the Florida street add will be identical. Or, in the case of a Florida lim ere authorized by an affirmative vote of the men icles of organization or the operating agreement	ress of the reported liability of the limited of the limited	gist cor imi d li	stered office and the busine mpany, it is hereby confirm ited liability company or a liability company.	ess off ned th	fice of the	registered ange(s)
		fatthew Ailey ture of a member or authorized representative of a member		atti	hew Ailey Printed or typed i		d'sionee	
prth to no.	here ovis e obi mer otifie r: ls	hy accept the appointment as registered agent a ions of all statutes relative to the proper and co ligations of my position as registered agent as p ely reflect a change in the registered office add d in writing of this change. s/ Matthew Ailey	and narou to i	ict ma n C co.	in this canacity. I further	aorei	e to comp	ly with the and accept being filed as been
S	gnati	ire of Registered Agent						

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

FAX COVER SHEET

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Stephen Avallone Fulfillment Associate I CT Corporation

Team (614) 280-3338
GlobalFulfillmentTeam@wolterskluwer.com