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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 : (855)330-1010 Fax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:\_\_

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN GREENWICH CAPITAL PARTNERS LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT **BUSINESS IN FLORIDA**

SEC	JHON I (1-4 must be completed)	
1. Name of limited liability Company as it	appears on the records of the Florida Department of	
State: Greenwich Capital Part	tners LLC	
Enter new principal office address, if applical	7901 4th St N	
(Principal office address	STE 300	
MUST BE A STREET ADDRESS)	St. Petersburg FL 33702	
Enter new mailing address, if applicable:	7901 4th St N	
(Mailing address MAY BE A POST OFFICE BOX)	STE 300	
MAT BE ATOST WITHELDON	St. Petersburg FL 33702	
2. The Florida document number of this lin	nited liability company is: M2100004003	
3. Jurisdiction of its organization: DE  4. Date authorized to do business in Florid  SECTION II (5-9 complete only the appl  5. New name of the limited liability compa		
(If name unavailable, enter alternate name copy of the written consent of the manager must contain "Limited Liability Company."	adopted for the purpose of transacting business in Florida and attach a s or managing members adopting the alternate name. The alternate name ""L.L.C." or "LLC.")	2022 MAR - 1
registered agent and/or the new registered of	registered officer address on our records, enter the name of the new-office address here:	AR FIL
Name of New Registered Agent: Regis	stered Agents Inc.	mÆ
New Registered Office Address: 7901	4th St N STE 300	7
	St. Petersburg , Florida 33702  City Zip Code	
New Registered Agent's Signature, if chan Thereby accept the appointment as registe.	•	

the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

Fitle/ Capacity	<u>Name</u>	<u>Address</u> <u>Type</u>	of Actio
<u>//GR</u>	RICHARD GIPSTEIN	360 HAMILTON AVENUE SUITE 615	□Add
		WHITE PLAINS, NY 10601	<b>%</b> Remo
MGR NETHANEL ABAD	NETHANEL ABADI	7750 OKEECHOBEE BLVD. STE 4 FMB 2041	□Add
		WEST PALM BEACH, FL 33411	<b>⊠</b> Reme
AMBR Greenwich Capital Group LLC	Greenwich Capital Group LLC	515 N Flagler Drive Suite P-300	<b>∑</b> lAdd
	West Palm Beach FL 33401	□Rem	
			□Add
		□Rem	
			□Add
aforementio	a certificate, if required; no more than oned amendment(s), duly authenticated under the law of which this entity is or	by the official having custody of records in the	□Rem

Elling Foot \$25.00

Typed or printed name of signee