## P05000/64220

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December 22, 2009

Division of Corporations P.O. Box 6198 Tallahassee, FL 32314

RE: JY Private Equity, Inc.

Dear Sir/Madam:

Enclosed please find a Statement of Change of Registered Office, along with the required filing fee in the amount of \$35.00 for the above referenced entity.

If you should have any questions, please feel free to contact me.

Sincerely,

Celeste A. Stellabott Legal Department

Enclosure

## **COVER LETTER**

TO:	Amendmen Division o	nt Section f Corporations				
SUBJ	ECT:	JY Private Equi	ty, Inc. oration			
DOC	UMENT NU	MBER:				
The e	nclosed State	ment of Change of Registered Office/A	gent and fee are submitte	ed for filing.		
Please	return all co	rrespondence concerning this matter to	the following:			
		Celeste A. St Name of Contac	ellabott ct Person			
		Susquehanna Internat	ional Group, LLP			
	401 City Avenue, Suite 220 Address					
		Bala Cynwyd, F City/State and 2	PA 19004 Zip Code			
	_	celeste.stellabotte E-mail address: (to be used for futu	@sig.com re annual report notific	ation)		
For fu	rther informa	ation concerning this matter, please call	:			
		eleste A. Stellabott	at ( 484 ) Area Code & Daytim	562-1255		
Enclo		00 check made payable to the Departme		e reiepiione rumoei		
		Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section of Corporation Building 2661 Executive Tallahassee, FL	oorations Center Circle		

TO:

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Flange is submitted for a corporation organized under the laws of the Sta	nte of Florida
	der to change its registered office or registered agent, or both, in the Sta	te of Florida.
	f the corporation: JY Private Equity, Inc.	
2. The principal	al office address: 1515 N. Federal Highway, Suite 300, Office	#29
	Boca Raton, FL 33432	
3. The mailing a	address (if different):	***************************************
4. Date of incorp	rporation/qualification: 12/16/2005 Document number:	P05000164220
	nd street address of the current registered agent and registered office on tartment of State: (If resigned, enter resigned)	file with the
	Autumn Nesbeth, c/o SIG	
	1515 N. Federal Highway, Suite 300, Office #29	09 OF
	Boca Raton, FL 33432	2 -
6. The name and (if changed):	nd street address of the new registered agent (if changed) and /or register	red office RY OF STATE STATE OF STATE O
	555 South Federal Highway, Suite 400	DE P
	P.O. Box NOT acceptable	
	Boca Raton, FL 33432	<del></del>
The street addre as changed will	ress of its registered office and the street address of the business offic Il be identical.	e of its registered agent,
Such change wa	vas authorized by resolution duly adopted by its board of directors or the board, or the corporation has been notified in writing of the change	by an officer so
BVI Signatur	Brian Sullivan Printed or typed name	Treasurer
I hereby accept I further agree t of my duties, an document is beil corporation has	t the appointment as registered agent and agree to act in this capacit to comply with the provisions of all statutes relative to the proper an nd I am familiar with and accept the obligation of my position as reg ring filed merely to reflect a change in the registered office address, I is been notified in writing of this change.	ly, nd complete performance vistered agent. Or, if this Thereby confirm that the
Neu )	Newbeda 121410	a e
Sigr	gnature of Registered Agent Date	
If signing on bel	ehalf of an entity:	
ту	Typed or Printed Name	
	* * * FILING FEE: \$35.00 * * *	

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (8/05)