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COVER LETTER

Amendment Section Division of Corporations

TO:

SID IFCT.	JY Private Equity, Inc	 		
SUBJECT: Name of Corporation				
	P05000164220			
DOCUMENT NU				
The enclosed States	ment of Change of Registered Office	Agent and fee are submitted for filing.		
Please return all co	rrespondence concerning this matter	to the following:		
	Celeste A. Stellabo	ott		
_	Name of Con	tact Person		
Susquehanna International Group, LLP				
Firm/Company				
401 City Avenue, Suite 220				
_	Addr	ess		
	Bala Cynwyd, F	PA 19004		
	City/State an	d Zip Code		
celeste.stellabott@sig.com				
_	E-mail address: (to be used for fu	ture annual report notification)		
For further informa	ation concerning this matter, please ca	all:		
Celeste A. Stellabott	•	484-562-1255		
		at () Name of Contact Person Area Code & Daytime Telephone Numbe		
Enclosed is a \$35.0	00 check made payable to the Departi	ment of State.		
	Mailing Address: Amendment Section	Street Address: Amendment Section		
	Division of Corporations	Division of Corporations		
	P.O. Box 6327	Clifton Building		
	Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301		

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

-	ons 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes,	
• •	or a corporation organized under the laws of the State of <u>Florida</u> istered office or registered agent, or both, in the State of Florida.	
in order to change as regi	stered office or registered agent, or both, in the state of 1 torica.	
1. The name of the corporation:	JY Private Equity, Inc.	
2. The principal office address:	555 South Federal Highway. Suite 400	
	Boca Raton, FL 33432	
3. The mailing address (if different	t):	
4. Date of incorporation/qualificati	ion: 12/16/2005 Document number: P05000164220	
5. The name and street address of the Florida Department of State: (If	the current registered agent and registered office on file with the resigned, enter resigned)	
	Nesbeth, Autumn	
	555 South Federal Highway, Suite 400	
	Boca Raton, FL 33432	
6. The name and street address of (if changed):	the new registered agent (if changed) and /or registered office	14 JUN-9
	SIG Holding, Inc.	
	555 South Federal Highway, Suite 400	9 FAIL: 56
	P.O. Box NOT acceptable	ପ୍ର ବି
	Boca Raton, FL 33432	
The street address of its registered as changed will be identical.	d office and the street address of the business office of its registe	ered agent,
Such change was authorized by reauthorized by the board, or the co	esolution duly adopted by its board of directors or by an officer or porporation has been notified in writing of the change.	so
British	Brian Sullivan, Treasurer	
Signature of an officer or director	··	
I hereby accept the appointment a further agree to comply with the performance of my duties, and I agent. Or, if this document is bein hereby confirm that the corporation.	as registered agent and agree to act in this capacity. e provisions of all statutes relative to the proper and complete im familiar with and accept the obligation of my position as reg ing filed merely to reflect a change in the registered office addre ion has been notified in writing of this change.	istered ess, I
Signature of Registered Age	5/22/14 Date	
If signing on behalf of an entity:		
Brian Sullivan, Treasurer		
Typed or Printed Name		

* * * FILING FEE: \$35.00 * * *