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SECRETARY OF STATE.

CALL AHASSET FINANCE.

1006 3 C 2019

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CSC - WILMINGTON
251 Little Falls Drive
Wilmington * De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Soraya Sariaslani soraya.sariaslani@cscglobal.com

Date: August 16, 2019

Order#: 866093/067

Re: SAH HARBOR FUND GP VIII, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Soraya Sariaslani c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

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

statement of change is si	ns of sections 607.0502, 617.050 ubmitted for a corporation organ nge its registered office or regist	nized under the laws of the State	e of FL	his ——-	-
	oration: SAH HARBOR FUND G		oj ramaa,		
	ddress: 18100 Von Karman Ave		2		
3. The mailing address (if different):				
4. Date of incorporation	/qualification: 10/29/1998	Document number: P980	000092260		
5. The name and street a	ddress of the current registered a	igent and registered office on fil			
СТС	C T CORPORATION SYSTEM				
1200 S	1200 SOUTH PINE ISLAND ROAD			9 AUG 20	
PLANTATION, FL 33324			(0)	20	Ī
6. The name and street a (it changed):	ddress of the new registered age		· '—	PM 2: 25	֡֝֞֝֝֟֝֟֝֝֟֝ <u>֚</u>
Corpora	ation Service Company			មា	
1201 H	lays Street				
	PO Box NOT				
Tallaha ———	issee 	FL 32301			
The street address of its as changed will be ident	registered office and the street ical.	address of the business office of	of its registere	ed ager	at,
authorized by the board.	rized by resolution duly adopted , or the corporation has been no	by its board of directors or by tified in writing of the change.	an officer so		
Xie 2 (aani	Jill Cilmi, Vice President			
I hereby accept the apparatus of the first agree to complete performance of my dutients agent. Or, if this docume hereby confirm that the Corporation Serv	pintment as registered agent an ly with the provisions of all states, and I am familiar with and a nent is being filed merely to reflect corporation has been notified ince Company	utes relative to the proper and accept the obligation of my posi ect a change in the registered on writing of this change.	complete	ered . I	
By: York Toky	Olize egistéged Agent	08/06/2019			
If signing on behalf of a		, , , , , , , , , , , , , , , , , , ,			
Grace E. Kirby, Assista	nt Vice President				
Typed or Prii	nted Name				
	* * * FILING FE	E: \$35.00 * * *			

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314