#### I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a general partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

#### SIGNATURE: MARC S. PLONSKIER

Electronic Signature of Signing General Partner Detail

Name and Address of Current Registered Agent:

LOVELL, TERRY M ESQ. 150 WEST FLAGLER STREET, SUITE 2200 MIAMI, FL 33130 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: TERRY M LOVELL

Electronic Signature of Registered Agent

### **General Partner Detail :**

Document #

Name EMERALD TERRACE LLC 120 FORBES BLVD. SUITE 180 Address

City-State-Zip: MANSFIELD MA 02048-1150

#### DOCUMENT# A0500002318

#### Entity Name: EMERALD TERRACE LIMITED PARTNERSHIP

### **Current Principal Place of Business:**

120 FORBES BLVD. SUITE 180 MANSFIELD, MA 02048-1150

# **Current Mailing Address:**

120 FORBES BLVD. **SUITE 180** MANSFIELD, MA 02048-1150 US

# FEI Number: 20-4147252

# PRES OF MGR OF GP

01/21/2020

01/21/2020 Date

### FILED Jan 21, 2020 Secretary of State 8296801833CC

Certificate of Status Desired: No

Date