State of Rhode Island
Department of State - Business Services Division

RECD RIDOS 850
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Certificate of Amendment

Limited Partnership

→ Filing Fee: $50.00

The undersigned, desiring to amend the Certificate of Limited Partnership under and by virtue of the power conferred by RIGL 7-13.1-201, hereby executes the following Certificate of Amendment to the Certificate of Limited Partnership:

1. Entity ID Number:	2. The name of the partnership is:
001339459	Antares Capital LP

3. If the entity's name is changing, state the new name:

Check the box to indicate no change ☐

4. The date of filing of the Certificate of Limited Partnership is: 08/06/2015

5. If there is a change in the general partners complete the following section:
List **ALL general partners as of this amendment*

NAME	ADDRESS

Check the box to indicate an attachment ☐ Check the box to indicate no change ☑

6. If adding or amending additional provisions, complete the following section:

The principal and mailing address has been changed to 320 S. Canal Street, Suite 4200, Chicago, IL 60606.

Check the box to indicate an attachment ☐ Check the box to indicate no change ☐

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

FILED
JAN 10 2025
BY
1233

FORM 301 - Revised: 12/2023

7. If there has been a dissociation of a person as a general partner, so state:

NAME	ADDRESS

8. The following person has been appointed to wind up the partnership's activities and affairs in accordance with RIGL 7-13.1-802(c) or (d):

NAME	ADDRESS

9. As required by RIGL 7-13.1, the partnership has paid all fees and taxes.

10. Date when this Certificate of Amendment will be effective: **CHECK ONE BOX ONLY**

☑ Date received (Upon filing)

☐ Later effective date (Date must be no more than 90 days from the date of filing) _____

11. This Certificate of Amendment is signed by at least one general partner and, if applicable, by each other general partner designated herein as a new general partner.

Under penalty of perjury, I/we declare and affirm that I/we have examined this Certificate of Amendment to the Certificate of Limited Partnership, including any accompanying attachments, and that all statements contained herein are true and correct.

Type or Print Name of Limited Partnership

Antares Capital LP

Signature of General Partner	Date
[signature]	12/26/2024
Signature of General Partner	Date
Signature of General Partner	Date
Signature of General Partner	Date
Signature of General Partner	Date

If you have any questions, please call us at (401) 222-3040, Monday through Friday, between 8:30 a.m. and 4:30 p.m., or email corporations@sos.ri.gov.