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COVER LETTER

Division of C				
SUBJECT: GATOR O	COUNTRY CLUB PART	NERS, LTD		
	ne of Florida Limited Par	tnership or Limited I	Liability I	Limited Partnership
The enclosed Certific	eate of Amendment ar	nd fee(s) are subn	nitted fo	or filing.
Please return all corre	espondence concernir	ig this matter to:		
GARY PRESTON			_	
	Contact Person			
GATOR INVESTMENT	S			
	Firm/Company		_	
7850 NW 146TH STREE	ET, FOURTH FLOOR			
	Address	•	_	
MIAMI LAKES, FLORI	DA 33016			
	ity, State and Zip Code		_	
GPRESTON@GATOR	INV.COM			
E-mail address: (to	be used for future annual	report notification)	_	
For further informati	on concerning this ma	atter, please call:		
GARY PRESTON		at (³⁰⁵	\949-90	49. EXT. 162
Name of Contac	et Person			ne Telephone Number
Enclosed is a check t	or the following amo	unt:		
\$52.50 Filing Fee	□\$61.25 Filing Fee and Certificate of Status	☐\$105.00 Filing and Certified Cop		□\$113.75 Filing Fee, Certified Copy, and Certificate of Status
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		

CERTIFICATE OF AMENDMENT CERTIFICATE OF LIMITED PARTNERSHIP

LTD	
on file with Florida Depa	artment of State
ertificate was filed w I Florida document n	
it to its certificate of	milited partnerstrip.
ring:	
the limited partnersh	ip or limited liability limited partnership
nguishable and contain an	acceptable suffix.
tnership, Limited, L.P., L lxes [,] Limited Liability Li	P. or Ltd. mited Partnership, L.L.L.P. or I.LLP.
rincipal office addre	ss, enter new mailing address and/or
<u> </u>	
	78
	# # ™
istered office address ce address here:	on our records, enter the name of the new
	_
	69
Enter F	lorida street address
	, Florida
City	Zip Code
	on file with Florida Departures. It ertificate was filed with Florida document in it to its certificate of ring: the limited partnersh and contain an intership. Limited, L.P., Livies: Limited Liability Livies: Limited Departures and recipal office addressistered

New Registered Agent's Signature, if changing Registered Agent:

		If Changing Registered Age	ent. Signature of New Registere
mendino	the general nartner(s) s	enter the name and business addre	eer of each gaparal part
r remove	d from our records:	ther the name and business addition	ess of each general parti
<u>tle</u>	<u>Name</u>	<u>Address</u>	Type of Action
			□ Add
			Remove
			□ Remove
			□ Remove
			Remove

(NOTE: If adding or removing" limited liability limited partnership" status, all general partners must sign this amendment,)

☐ This Limited Partnership hereby removes its "Limited Liability Limited Partnership" status.

SECTION 7 OF THE CERTIFICATE O	ormation, enter change(s) here: (Attach additional sheets, if necessary.) OF LIMITED PARTNERSHIP IS DELETED IN ITS ENTIRETY AND
AMENDED AS FOLLOWS:	
"7. THE TERM OF THE PARTNERSI	IIP SHALL BE PERPETUAL UNLESS SOONER TERMINATED
OR DISSOLVED BY OPERATION OF	L A W OR AS OTHERWISE PROVIDED PURSUANT
TO THIS CERTIFICATE."	
State.)	re than 90 days after the date this document is filed by the Florida Department of
removing a "limited liability limited partn	r or all general partners*: ner is required to sign this document unless the limited partnership is adding or nership" election statement. Chapter 620, F.S., requires all general partners to sig lity limited partnership" election statement.)
GATOR COUNTRY CLUB PARTNER GATOR COUNTRY CLUB INVESTOR GENERAL PARTNER	
JAMES A. GOLDSMITH, PRESIDEN	<u>T</u>
Signature(s) of all new or dissocia	ating general partner(s), if any:
Filing Fee: Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$52.50 \$8.75