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(Re	questor's Name)	<u> </u>
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	ne #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
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MAY 0 3 2017 S. YOUNG SECRETARY OF STATE

COVER LETTER

TO: Registration Division of	Section Corporations			
SUBJECT:	3.	1 Burlington, LTD		
N		rtnership or Limited Liabilit	ty Limited Partnership	_
The enclosed Certif	icate of Amendment a	nd fee(s) are submitted	for filing.	
Please return all cor	respondence concerni	ng this matter to:		
	Mitchell Rosenstein			
	Contact Person			
	31 Burlington, LTD			
	Firm/Company	* *		
10	00 SE 3rd Ave, FL 1	0		
	Address			
Fort	Lauderdale, FL 333	394		- FE
	City, State and Zip Code			三三元
mrocens	stein@greenmillsgro	un com		7
	be used for future annual			一
`		•		고 있다
For further informat	tion concerning this m	atter, please call:		CRETARY OF STATE LAHASSEE, FLORIDA
Diana	a Mansur	at (954)	507-6219	S S
Name of Cont	act Person	Area Code and Day	rtime Telephone Number	
Enclosed is a check	for the following amo	ount:		
\$52.50 Filing Fee	\$61.25 Filing Fee and Certificate of Status	\$105.00 Filing Fee and Certified Copy	\$113.75 Filing Fee, Certified Copy, and Certificate of Status	
STREET ADDRES	SS:	MAILING.	ADDRESS:	
Registration Section		Registration		
Division of Corpora	ations		Corporations	
Clifton Building		P. O. Box 63		
2661 Executive Cer	iter Circle	Tallahassee,	FL 32314	

Tallahassee, FL 32301

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

		.			
		lington, LTD			_
Insert name curre	ntly on f	ile with Florida Departmen	it of State		
Pursuant to the provisions of section 620 limited liability limited partnership, whose 12/12/2014, assignadopts the following certificate of amend	se certif gned Flo	icate was filed with the orida document number	e Florida De er <u>A1</u>	epartment of 1 1400000070	State on
This amendment is submitted to amend the fo	llowing:		•	•	
A. If amending name, <u>enter the new name</u> <u>here</u> :	of the	limited partnership or	limițed liabi	lity limited pa	<u>rtnership</u>
New name must be o	listinguis	hable and contain an accep	table suffix.		
Acceptable Limited Partnership suffixes: Limited Acceptable Limited Liability Limited Partnership	suffixes:	Limited Liability Limited i	Partnership, L		
B. If amending mailing address and/or principal office address here:	r princ	ipai omice address, <u>er</u>	iter new ma	=	ASS SEC
New Principal Office Addr	ess:	100 SE 3rd Ave, F			AHA AHA
(Must be STREET address)		Fort Lauderdale, F 33394	<u></u>		F
New Mailing Address: (May be post office box)		100 SE 3rd Ave. F			OF STA E.FLOR PM 4:
(May be post office box)		33394			5 OF
C. If amending the registered agent and/onew registered agent and/on the new registered.			our records	, <u>enter the na</u>	me of the
Name of New Registered Agent:	Mitch	nell Rosenstein	 		
New Registered Office Address:	100	SE 3rd Ave, FL 10 Enter Florida	street addres		
		Fort Lauderdale	Florida	FL	
		City		Zip Code	

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

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

If Changing Registered Agent, Signature	of New Registered Agent

D.	If amending the general	l partner(s),	enter the name	and business	address of	each genera	l partner	<u>beine</u>
<u>ade</u>	<u>led or removed from our</u>	records:						

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			Add Remove
 .			Add Remove Add Remove Add Remove Remove
			Add
			Add Remove
			Add Remove
			Add Remove
	ed partnership or limited liability ship" status, enter change here:	limited partnership is a	mending its "limited liability
This Lim	ited Partnership hereby elects to be a	"Limited Liability Limit	ed Partnership."
This Lim	ited Partnership hereby removes its '	Limited Liability Limited	l Partnership" status.

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

F. If amending any other info	rmauon, ei	iter change(s) nere: (Anach i	iaannonai sneeis,	ij necessary	.)
			, . , , , , , , , , , , , , , , , , , ,			

Effective date, if other than the da Effective date cannot be prior to nor mo	te of filing re than 90 de	:ays after the do	ite this document i	s filed by the Flori	da Departme	nt of
state.)					•	
Signature(s) of a general partne	r or all ge	neral partn	ers*:			
*NOTE: Only one current general parts						
emoving a "limited liability limited part when adding or removing a "limited liab	nership" elec ility limited p	tion statement partnership" el	. Chapter 620, F.S ection statement.)	s., requires all gene	eral partners to	o sign
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Signature(s) of all new or dissoc	iating gen	eral partne	r(s). if any:		ហ	Q.
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Filing Fee: Certified Copy (optional):	\$52.50 \$52.50					
ceruneu Copy (opuonai):	\$8.75					