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print this page and use it as a cover sheet.

Florda Department of Sta



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : GUNSTER, YOAKLEY & STEWART, P.A.

Account Number : 076117000420 Phone : (561)650-0728 : (561)671-2527 Fax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:\_

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## LP/LLLP AMENDMENT/RESTATEMENT/CORRECTION **EURO LINK LP**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$52.50

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M. SOLOMOR

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## CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

EURO LINK LP	
Insert name currently on file wi	th Florida Department of State
Pursuant to the provisions of section 620.1202, Floridalizated liability limited partnership, whose certificate Apri 14, 2015, assigned Floridalizated	was filed with the Florida Department of State on
adopts the following certificate of amendment to its o	certificate of limited partnership.
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limit here:	ted partnership or limited liability limited partnership
New name must be distinguishable	and contain an acceptable suffix.
Acceptable Limited Partnership suffixes: Limited Partnership, Acceptable Limited Liability Limited Partnership suffixes: Limi	Limited, L.P., LP, or Ltd. ited Liability Limited Partnership, L.L.L.P. or LLLP.
B. If amending mailing address and/or principal <u>principal office address here</u> :	
New Principal Office Address:	2021 KAR 10
(Must be STREET address)	
_	
New Mailing Address:	<u></u>
(May he post office box)	<u> </u>
	<u> </u>
C. If amending the registered agent and/or registered o	office address on our resords, enter the name of the new
registered agent and/or the new registered office addre	
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida City Zip Code
	CII VIII

## 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 partner(s), enter the name and business address of each general partner being added or removed from our records:

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>GP</u>	GTV, LLC	1700 Palm Beach Lakes Blvd. Suite 1100 West Palm Beach, FL 33401	□ Add ■ Remove
<u>GP</u>	UNITERS GROUP, LLC	1700 Palm Beach Lakes Blvd. Suite 11000 West Palm Beach, FL 33401	□ Add □ Remove
			Add Remove 19
<del></del>	<del>.</del>		_ □ Add¹♀ ₽ ☐ ☐ Remove 듯 □
<u>-</u>			□ Add □ Remove
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E. If the limited partnership or limited liability limited partnership is amending its "limited liability limited partnership" status, enter change here:

- ☐ This Limited Partnership hereby elects to be a "Limited Liability Limited Partnership."
- This Limited Partnership hereby removes its "Limited Liability Limited Partnership" status.

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

gnature(s) of all new or dissociating general partner(s), if any:  UNITERS O  By: /s/ Gon  Gordian		- <u>-</u> -	
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