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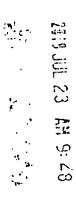
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COVER LETTER

Division of C				
SUBJECT: Mellow	Yellow Beach Limited Par	tnership		
No.	une of Florida Limited Par	tnership or Limited Liubi	lity Limited Partnership	
The enclosed Certifi	cate of Amendment a	nd fee(s) are submitte	ed for filing.	
Please return all corr	respondence concernii	ng this matter to:		
John Paulich III				
	Contact Person			
GrayRobinson, P.A.				
	Firm/Company			
3838 Tamiami Trail No	rth, Suite 410			
	Address			
Naples, Florida 34103				
	City, State and Zip Code			
john.paulich@gray-rob	inson.com			
E-mail address: (to	be used for future annual	report notification)		
For further informat	ion concerning this ma	atter, please call:		
John Paulich III		at (²³⁹) 59	8-3601	
Name of Contact Person			aytime Telephone Number	
Enclosed is a check	for the following amo	unt:		
S52.50 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 ADDRESS:		MAILING ADDRESS:		
Registration Section		Registration Section		
Division of Corporations			f Corporations	
Clifton Building 2661 Executive Center Circle		P. O. Box 6327 Tallahassee, FL 32314		
Tallahassee FL 321		r anamasse.	-, , , , , , , , , , , , , , , , , , ,	

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

Mellow Yellow Beach Limited Partnership	
Insert name currently on file	with Florida Department of State
	orida Statutes, this Florida limited partnership or ate was filed with the Florida Department of State on ida document number A19000000208
adopts the following certificate of amendment to it	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the lin	nited partnership or limited liability limited partnership
Mellow Yellow Beach (US) Limited Partnership	
New name must be distinguisha	ble and contain an acceptable suffix.
	p, Limited, L.P., LP, or Ltd. mited Liability Limited Partnership, L.L.L.P. or LLL. al office address, enter new mailing address and/or
principal office address here:	<u>, ""</u>
New Principal Office Address: (Must be STREET address)	
New Mailing Address: (May be post office box)	
C. If amending the registered agent and/or register new registered agent and/or the new registered office	ed office address on our records, enter the name of the address here:
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	Florida

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.

<u>itle</u>	<u>Name</u>	<u>Address</u>	Type of Action
			□ Da
			□ n
			☐ Remove
he limite	ed partnership or limited li ship" status, enter change l	iability limited partnership is	amending its "limited

F. If amending any other info	ormation, enter	change(s)	here: (Attach a	dditional sheets, i	(necessary.)
					
		_			
Effective date, if other than the da (Effective date cannot be prior to nor mo State.)	nte of filing: ore than 90 days	after the date	this document i	s filed by the Florid	a Department of
Note: If the date inserted in this block do be listed as the document's effective date				uirements, this date	will not
Signature(s) of a general partne	r or all gener	al partner	<u>'\$*:</u>		
(*NOTE: Only one current general part removing a "limited liability limited part when adding or removing a "limited liab	mership" election	statement.	Chapter 620, F.S		
Sugar Beach Estates GP, Inc.					
		•	•		
By: Carmen Campagnaro, its President					
Signature(s) of all new or dissoc	iating genera	l partner(s), if any:		
	<u></u>	•	· · · · · · · · · · · · · · · · · · ·		
		•			
		•			
Filing Fee: Certified Copy (optional):	\$52.50 \$52.60				
Certificate of Status (optional):	\$52.50 \$8.75				