

MO9000003412  
Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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((H18000210331 3)))



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To: Division of Corporations  
Fax Number : (850)617-6393  
From: Rosa Wong, Paralegal  
Account Name : AKERMAN LLP - MIAMI  
Account Number : 075471001363  
Phone : (305)374-5600  
Fax Number : (305)374-5095

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

Email Address: \_\_\_\_\_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
KITSON & PARTNERS CONSTRUCTION MANAGEMENT,  
LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$55.00

SECRETARY OF STATE  
TALLAHASSEE FLORIDA  
18 JUL 20 AM 9:17

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O. SIMMONS  
JUL 23 2018

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2018 JUL 20 PM 12:32

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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of State: KITSON & PARTNERS CONSTRUCTION MANAGEMENT, LLC

Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2. The Florida document number of this limited liability company is: M09000003412

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: August 31, 2009

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: (must contain "Limited Liability Company," "L.L.C.," or "LLC.")

KITSON & PARTNERS PROJECT MANAGEMENT, LLC

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

6. If amending the registered agent and/or registered officer address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida Street Address

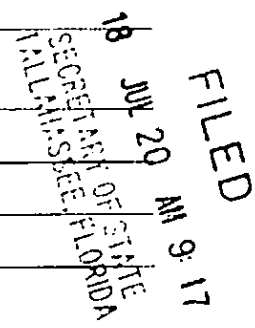
City Florida Zip Code

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 as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

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7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

\_\_\_\_\_

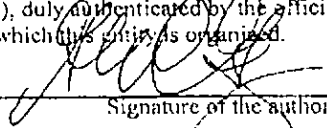
8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(c), indicate that change:

\_\_\_\_\_

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
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_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove

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9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this organization is organized.

  
 \_\_\_\_\_  
 Signature of the authorized representative  
 Glenn C. Geiger  
 \_\_\_\_\_  
 Typed or printed name of signee

Filing Fee: \$25.00

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# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "KITSON & PARTNERS CONSTRUCTION MANAGEMENT, LLC", CHANGING ITS NAME FROM "KITSON & PARTNERS CONSTRUCTION MANAGEMENT, LLC" TO "KITSON & PARTNERS PROJECT MANAGEMENT, LLC", FILED IN THIS OFFICE ON THE NINETEENTH DAY OF JULY, A.D. 2018, AT 3:59 O'CLOCK P.M.



  
Jeffrey W. Bullock, Secretary of State

4642727 8100  
SR# 20185750429

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

Authentication: 203097517  
Date: 07-19-18

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State of Delaware  
Secretary of State  
Division of Corporations  
Delivered 03:59 PM 07/19/2018  
FILED 03:59 PM 07/19/2018  
SR 20:85750429 - File Number 4642727

**CERTIFICATE OF AMENDMENT  
TO  
CERTIFICATE OF FORMATION  
OF  
KITSON & PARTNERS CONSTRUCTION MANAGEMENT, LLC**

It is hereby certified that:

1. The name of the limited liability company is **KITSON & PARTNERS CONSTRUCTION MANAGEMENT, LLC** (hereinafter called the "Company"). The filing date of the Certificate of Formation was January 8, 2009.

2. Pursuant to the Delaware Limited Liability Company Act, the Certificate of Formation of the Company is hereby amended as follows:

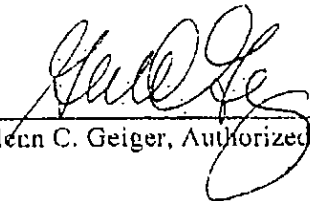
3. Article 1. of the Certificate of Formation of the Company is hereby deleted in its entirety and the following text is inserted in lieu thereof:

"1. The name of the limited liability company is **KITSON & PARTNERS PROJECT MANAGEMENT, LLC** (the "Company")."

4. Except as hereby amended, the Certificate of Formation of the Company shall remain unchanged.

5. This amendment shall be effective as of the date of filing of this Certificate of Amendment.

Executed on this 19<sup>th</sup> day of July, 2018.

  
\_\_\_\_\_  
Glenn C. Geiger, Authorized Person