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(Re	questor's Name)				
(Ad	dress)	<u> </u>			
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, (Cit	y/State/Zip/Phone	#)			
PICK-UP	☐ WAIT	MAIL			
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SEGRETARY OF STATE

T. HAMPTON

JUL - 3 2008

EXAMMER

COVER LETTER

TO: Registration S Division of C						
SUBJECT:	me of Florida Limited Par	thership or Limited Liability	P Limited Partnershin)			
		nd fee(s) are submitted				
Please return all corr	espondence concernin	ng this matter to:	·			
Christon	(Contact Person)	ZLLLP	· ·			
<u> Wadsw</u>	orth King	3 LLLP				
	(Firm/Company)	, , , , , ,				
2005.E	(Address)	= Ste 1100				
Miani	(Address) FL 33131					
(0	City, State and Zip Code)					
For further informati	on concerning this ma	atter, please call:				
Chris Wad	sworth	at (305) 77	7-1000			
(Name of Conta	act Person)	(Area Code and D	27-1000 aytime Telephone Number)			
Enclosed is a check to	for the following amou	unt:				
\$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 ADDRESS: MAILING ADDRESS:						
Registration Section	•	Registration Section				
Division of Corporat Clifton Building	ions	Division of Corporations P. O. Box 6327				
2661 Executive Cent	er Circle	Tallahassee, FL 32314				

Tallahassee, FL 32301

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

-	OF .
Wadsworth	L'EKING LLLP
	with Florida Department of State)
Pursuant to the provisions of section 620.1202, Floi limited liability limited partnership, whose certific O1/23/06, assigned Flor adopts the following certificate of amendment to it	orida Statutes, this Florida limited partnership or ate was filed with the Florida Department of State on ida document number Acta Coccos 158, ts certificate of limited partnership.
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the line	mited partnership or limited liability limited partnership
Wadsworth Huc	
(New name must be distinguisha	ble and contain an acceptable suffix.)
Acceptable Limited Partnership suffixes: Limited Partnershi Acceptable Limited Liability Limited Partnership suffixes: L	
B. If amending mailing address and/or princip principal office address here:	al office address, enter new mailing address and/or
New Principal Office Address: (Must be STREET address)	
New Mailing Address: (May be post office box)	
C. If amending the registered agent and/or registernew registered agent and/or the new registered office	red 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)
	(City) (Zip Code)

Page 1 of 3

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),	<u>enter</u>	the name	and	business	address	of eacl	ı general	partner	being
ade	led or removed from our records:									

<u>Title</u>	<u>Name</u>	Address	Type of Action
			_
			_ Add _ Remove
· ·			
			FESSON SECTION
			_
			_ □ Add □ Remove

E. If the limited partnership or limited liability limited partnership is amending its "limited liability limited partnership" status, enter change here:

	This Limited	Partnershin	hereby elects to	he a "Limited	l Liability Limited	d Partnershin.'
_	I IIIS LAIDILEU	I 41 UICI MIID	HELEDA CIETTO H	JUCA LIIIIICU	i Liadilla Pillinci	u a an microniu.

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.)

F. If amending any other information	n, enter cl	hange(s) here:	(Attach addition	al sheets, if necessary.)
		-		•
		· •		
				·
Effective date, if other than the date (Effective date cannot be prior to nor mor State.)	e of filing e than 90 d	; ays after the date	this document is	filed by the Florida Department of
Signature(s) of a general partner	or all ge	neral partner	<u>s*:</u>	
(*NOTE: Only one current general partn removing a "limited liability limited partn when adding or removing a "limited liabil	ership" elec	ction statement.	Chapter 620, F.S.,	limited partnership is adding or requires all general partners to sign
Christopher W.W	adsu	orth.		
- MW O W W WW		-		
		•		
				· · · · · · · · · · · · · · · · · · ·
Signature(s) of all new or dissoci	ating gen	eral partner(s), if any:	
	<u>.</u>	-		
			- ···	
	<u> </u>		···	
			•	
				-
Filing Fee:	\$52.50			08 . SECR
Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$8.75			
				NY ON
		Page 3 of 3		PM 2 OF STA
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