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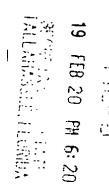
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FEB 2 5 2019 S. YOUNG



COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Cator Newport Partners, Ltd.			
Name of Florida Limited Partnership or Limited Liabilit	ty Limited Partnership		
The enclosed Certificate of Amendment and fee(s) are submitted	for filing.		
Please return all correspondence concerning this matter to:			
Erika Wilson			
Contact Person			
Gator Investments			
Firm/Company			
7850 NW 146th Street, 4th Floor			
Address			
Miami Lakes, FL 33016			
City, State and Zip Code			
ewilson@gatorinv.com			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Erika Wilson at (305) 949-	-9049 #118		
Name of Contact Person Area Code and Day	ytime Telephone Number		
Enclosed is a check for the following amount:			
■ \$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	MAILING ADDRESS:		
_	Registration Section		
<u>.</u>	Corporations		
	P. O. Box 6327 Tallahassee, FL 32314		
2661 Executive Center Circle Tallahassee, Tallahassee, FL 32301	. P.L. 32314		

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

Gator Newport Partners, Ltd.			
Insert name currently on fi	le with Florida Dep	artment of State	
	cate was filed w rida document r	ith the Florida Depa umber <u>A00000000</u> 99	artment of State on
adopts the following certificate of amendment to	its certificate of	limited partnership	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the l here:	imited partnersh	úp or limited liabilit	y limited partnership
New name must be distinguish	nable and contain ar	acceptable suffix.	.
Acceptable Limited Partnership suffixes: Limited Partnersh Acceptable Limited Liability Limited Partnership suffixes:			L.P. or LLLP.
B. If amending mailing address and/or principal office address here:	pal office addre	ess, <u>enter new mail</u>	ing address and/or
New Principal Office Address: (Must be STREET address)			EB 20 PH
New Mailing Address: (May be post office box)			6: 20
C. If amending the registered agent and/or registenew registered agent and/or the new registered office		ess on our records, <u>e</u>	enter the name of the
Name of New Registered Agent:			
New Registered Office Address:	Enter F	lorida street address	
		, Florida	
	City		n Code

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

I hereby accept the appointment as registered agent comply with the provisions of all statutes relative to am familiar with and accept the obligations of my po	the proper and complete performance of my duties, and I
	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>	<u>Address</u>	Type of Action
			☐ Add☐ Remove
			☐ Add☐ Remove
	-		☐ Add☐ Remove
			□ Add □ Remove
	· · · · · · · · · · · · · · · · · · ·		☐ 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 Partnershi	p herebi	y elects to be a '	'Limited Liabilit	y Limited Partnership."
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☐ 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, of Section 5.1 of the Agreement of Limited Partnership	enter change(s) here: (Attach additional sheets, if necessary.) p is deleted in its entirety and amended as follows:
"5.1 The term of the Partnership shall be perpetua	.1."
Effective date, if other than the date of filin (Effective date cannot be prior to nor more than 90	g:
State.) Note: If the date inserted in this block does not mee be listed as the document's effective date on the De	the applicable statutory filing requirements, this date will not partment of State's records.
Signature(s) of a general partner or all g	eneral partners*:
	red to sign this document unless the limited partnership is adding or ection statement. Chapter 620, F.S., requires all general partners to sign partnership" election statement.)
Gator Newport Partners, Ltd.	
By: Gator Newport, Inc., General Partner	
Ву:	<u> </u>
James A. Caldsmith, President	
Signature(s) of all new or dissociating ge	neral partner(s), if any:
	· · · · · · · · · · · · · · · · · · ·
Filing Fee: \$52.50	
Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75	