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(Requestor's Name)		
(Address)		
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(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Duginas Estitubless)		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		

Office Use Only



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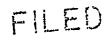
2019 NAR 19 P IZ 1

APR 0 5 1019 T. LEMIEUX

COVER LETTER

TO: Registration Division of	n Section Corporations			
SUBJECT: Finlay	Interests 3, Ltd.			
	lame of Florida Limited Pa	rtnership or Limited Liabilit	y Limited Partnership	
The enclosed Certif	ficate of Amendment a	nd fee(s) are submitted	for filing.	
Please return all co	rrespondence concerni	ng this matter to:		
Mathew Keegan				
	Contact Person			
Ward, Murray, Pace &	Johnson, P.C.			
	Firm/Company			
226 W. River Street, P	.O. Box 404			
	Address			
Dixon, IL 61021				
	City, State and Zip Code			
keegan@wmpj.com				
E-mail address: (t	o be used for future annual	report notification)		
For further informa	tion concerning this m	atter, please call:		
Mathew Keegan		at ()_625-	8200	
Name of Cont	act Person		time Telephone Number	
Enclosed is a check	for the following amo	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 A	ADDRESS:	
Registration Section		Registration Section		
Division of Corporations			Division of Corporations	
Clifton Building		P. O. Box 6327		
2661 Executive Cer		Tallahassee.	FL 32314	
Tallahassee, FL 32	301			

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF



Finlay Interests 3, Ltd.		2019 NAR 19 P 12: 64
Insert name currently on fi	le with Florida	Denartment of State
Pursuant to the provisions of section 620.1202. F limited liability limited partnership, whose certifically 2001 assigned Florida.	icate was file	
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 partne	ership or limited liability limited partnership
New name must be distinguish	nable and contai	n an acceptable suffix.
Acceptable Limited Partnership suffixes: Limited Partnersh Acceptable Limited Liability Limited Partnership suffixes:		
B. If amending mailing address and/or princi principal office address here:	pal office ad	dress, 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 registered agent and/or the new registered office Name of New Registered Agent:		
Name of New Registered Agent.		
New Registered Office Address:	Ente	r Florida street address
		Florida
 -	City	Plonda 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.

If Changing Registered	Agent, Signature of New Res	gistered 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>	Name	Address	Type of Action
<u>GP</u>	The Burton Foundation	2090 Larkin Avenue - Suite 5A-1 Elgin, IL 60123	_ □ 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 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.)

Effective date, if other than the date of filir (Effective date cannot be prior to nor more than 90 State.)	ng:
	et the applicable statutory filing requirements, this date will not epartment of State's records.
Signature(s) of a general partner or all g	general partners*:
	ired to sign this document unless the limited partnership is adding or lection statement. Chapter 620, F.S., requires all general partners to sign d partnership "election statement.)
Roosevelt GP, LLC	
Q'By	
By James N. Bergman, Manager	
Signature(s) of all new or dissociating ge	eneral partner(s), if any:
The Burton Foundation	
	·
By Tracey L. Manning, President	
	·
Filing Fee: \$52.50	
Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75	