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B. KOHR
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EXAMINER

HULUUUUUI382 HOLDINGS PARTHERSHIP CTD. **COVER LETTER**

TO: Registration Section Division of Corporations

SUBJECT: GLOBAL MANAGEMENT HOLDINGS

(Name of Florida Limited Partnership or Limited Liability Limited Partnership)

The enclosed Certificate of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

STEPHE	N J. BASE	MAN.	
	(Contact Person)		08 TA
	(Firm/Company)		APR CREE LLAH
YO. BO	× 856.		R 24 R ANASS
	(Address)		P ED
Annal	JARIA FL	-34216.	PH 4:30 OF STATE EE, FLORIG
	(City, State and Zip Code)		
			A
For further informate	tion concerning this ma	atter, please call:	
STEPHEN E	SASEDAN.	at (941_) ≥	50-2322
(Name of Con	tact Person)	(Area Code and D	aytime Telephone Number
Enclosed is a check	for the following amo	unt:	PR F
\$52.50 Filing Fee	\$61.25 Filing Fee	\$105.00 Filing Fee	S113.75 Filing Fee. Certified Copy, and O
	and Certificate of Status	and Certified Copy	Certified Copy, and Certificate of Status
STREET ADDRES	20.	MAILING	ADDDESS: SHOW W
SIKKRI AIIIKKNS'			

Registration Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Registration Section **Division of Corporations** P. O. Box 6327 Tallahassee, FL 32314

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

GLOBAL MANAGEMENT HOLDINGS PARTNERSHIP LTD.

(Insert name currently on file with Florida Department of State)

limited liability limited partnership,	620.1202, Florida Statutes, this Florida limited partnership or whose certificate was filed with the Florida Department 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 here:	name of the limited partnership or limited liability limited partnership				
(New name must be distinguishable and contain an acceptable suffix.) Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd. Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or D.L.P. B. If amending the registered agent and/or registered office address on our records, enter the flame of the new registered agent and/or the new registered office address here:					
new registered agent and/or the new r					
Name of New Registere	d 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)

C. 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
GP -	NORTHERN MANA	866 HUDSON GARASOTA FL	Add Remove
GP	FIRST NATIONAL, LLC	866 Hudson Ave.	□ Add 236 Remove
		Sarasota, FL 34	
			Add Remove
			Add Remove
			Add
			Remove
			Add Remove
	ited partnership or limited li ership" status, enter change l	iability limited partnership is am here:	nending its "limited liability
•	_	to be a "Limited Liability Limited P	artnership."
☐ This Limi	ted Partnership hereby remove	es its "Limited Liability Limited Pa	rtnership" status.
(NOTE: If addi	ng or removing" limited liability lin	mited partnership" status, all general pa	rtners must sign this amendment.
E. If amendin	g any other information, enter	change(s) here: (Attach additional s	heets, if necessary.)
	· · · · · · · · · · · · · · · · · · ·		

Effective date, if other than the da	te of filing	a:	
(Effective date cannot be prior to nor mo State.)	re than 90 d	gdays after the	date this document is filed by the Florida Department of
Signature(s) of a general partner	r or all ge	eneral part	ners*:
	nership" ele	ection statemen	s document unless the limited partnership is adding or nt. Chapter 620, F.S., requires all general partners to sign election statement.)
MORTHERN MANAGET	1ENT 1	LC -	Supl Juston
Signature(s) of all new or dissoci	isting ger	neral nartn	er(s), if any
FIRST NATIONALL	<u> </u>	iciai partii	Durbara Costmen
Filing Fee: Certified Copy (optional):	\$52.50 \$52.50		
Certificate of Status (optional):	\$8.75		