Division of Corporations Electronic Filing Cover Sheet

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TO:

002798,178014

Division of Corporations

Fax Number

1 (850) 517-6383

From:

Account Name : CORPDIRECT AGENTS, INC.

Account Number : 110450000714 Phone : (850)222-1173

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LP/LLLP AMENDMENT/RESTATEMENT/CORRECTION

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THE TRITON CREW LTD.

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12 DEC 17 AMII: 39
SLUBHASSEE, FLORIDA

G. MCLEOD

DEC 18 2012

EXAMINER

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CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

The Tinsert name currently on	riton Crew Ltd		•
Pursuant to the provisions of section 620,1202, limited liability limited partnership, whose cert March 3, 2002, assigned F	ificate was filed w Florida document i	rith the Florida Department of SnumberA0200000396	State on
adopts the following certificate of amendment	to its certificate of	flimited partnership.	
This amendment is submitted to amend the following	g;		
A. If amending name, enter the new name of the here:	e limited parineral	nip or Umited Hability Hmited pa	rmership
. The Trit	ton Crew LLLF	>	
New name must be distingu			
Acceptable Limited Partnership suffixes: Limited Partne Acceptable Limited Liability Limited Partnership suffixe.	rship, Limited, L.P., I s: Limited Liability L	LP, or Ltd. inited Parmership, L.L.L.P. or LLLP.	
B. If amending malling address and/or prin principal office address here:	cipal office addr	ess, <u>enter new mailing addres</u>	and/or
New Principal Office Address: (Must be STREET address)		F.C.	12 DEC
New Mailing Address: (May be past office bas)		SSX SSX	7
C. If amending the registered agent and/or reginew registered agent and/or the new registered of	istered office addr ffice address here:	ess on our records, enter fire nan	ue the
Name of New Registered Agent:			
New Registered Office Address:			
	Enter F	lorida straet address	
·		, Florida	
	Clty	Zip Code	

Page 1 of 3

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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	g Registered Agent, Sit	mature of Man Book	Planed Amont
AL CHAIRM	E VARIABLES LANGULY AT	THE RESERVE AND ADDRESS.	BIRLON DECILI

D. If amending the general partner(s), enter the name and business address of each general partner being added or removed from our records:

Title	Name	Address	Type of Action
	the state of the s		Add Remove
			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:

abla	This Limited Partnership hereby elects to be a "Limited Liability Limited Partnership."
------	---

NOTE: If adding ar removing" limited liability limited partnership" status, all general partners must sign this amendment.)

This Limited Partnership hereby removes its "Limited Liability Limited Partnership" status.

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F. If amending any other info	rmation, enter chang	e(s) here: (Attach additional sheets, if necessary.)
	•	
Effective date, if other than the da (Effective date cannot be prior to nor mo State.)	ite of filing: ore than 90 days after the	date this document is filed by the Florida Department of
Signature(s) of a general partne	r or all general par	tners*;
(*NOTE: Only one current general part removing a "limited liability limited part when adding or removing a "limited liability limited liability liability limited liability limited liability limited liability li	nership" election stateme	is document unless the limited partnership is adding or ent. Chapter 620, F.S. requires all general partners to sign election statement.) X Alan Ojeda
Signature(s) of all new or dissoc	iating general partr	ger(s), if any:
	·····	
<u> </u>		· .
Filing Fee: Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$52.50 \$8.75	