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(Requestor's Name)				
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PICK-UP	WAIT	MAIL		
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(D-	cument Number)	· · · · · · · · · · · · · · · · · · ·		
(LO	cument Number)			
Certified Copies	_ Certificates	of Status		
Special Instructions to	Elling Officer			
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Office Use Only



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COVER LETTER

TO: Registration Division of	n Section Corporations					
GUD HEATE GCS R	eal Estate Partnership, Ltd.					
SUBJECT:	Name of Florida Limited Pa	rtnership or Limited L	Liability Limited Par	tnership	-	
The enclosed Certi	ficate of Amendment a	and fee(s) are subm	nitted for filing.			
Please return all co	rrespondence concerni	ng this matter to:				
Patrick Fields						
	Contact Person		•			
GCS Real Estate Partr	nership, Ltd.					
	Firm/Company		-			
428 Walnut Street						
	Address	· · · · · · · · · · · · · · · · · · ·	-			
Green Cove Springs, I	FL 32043					
	City, State and Zip Code		-			
brandilowery@duval	fields.com					
E-mail address: (to be used for future annua	report notification)	-	, i , -i	2023 년보 31 - 무렵12: 20	e ;
For further informa	ntion concerning this m	atter, please call:			E 3	
Patrick Fields		at (904	269-1069			<u>;</u>
Name of Con	tact Person		id Daytime Telephoi	ie Number (1		ye t E New
Enclosed is a check	c for the following amo	ount:			2: 23	•
\$ \$52.50 Filing Fee	☐\$61.25 Filing Fee and Certificate of Status	□\$105.00 Filing and Certified Cop				
Mailing Address:			Address:			
Registration Section			ation Section			
Division of Corpor	ations		on of Corporation			
P.O. Box 6327 Tallahassee, FL 32	314		ntre of Tallahass I. Monroe Street,			
rananassee, 1 to 32	<i>J</i> 1 [™]		issee, FL 32303	June OTO		

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

GCS Real Estate Partnership, Ltd		
Insert name currently on f	ile with Florida Depar	tment of State
Pursuant to the provisions of section 620.1202. I limited liability limited partnership, whose certif July 3, 2002, assigned Flo	īcate was filed wit orida document nu	h the Florida Department of State or mber A02000000912
adopts the following certificate of amendment to	its certificate of li	mited partnership.
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the here</u> :	limited partnership	or limited liability limited partnersh
New name must be distinguis	hable and contain an a	acceptable suffix.
Acceptable Limited Partnership suffixes: Limited Partners Acceptable Limited Liability Limited Partnership suffixes:		
B. If amending mailing address and/or princ <u>principal office address here</u> :	ipal office address	s, enter new mailing address and/o
New Principal Office Address: (Must be STREET address)		73 JUL 3
New Mailing Address: (May be post office box)		- FR 12: 2
C. If amending the registered agent and/or register registered agent and/or the new registered office ac		n our records, <u>enter the name of the ne</u>
Name of New Registered Agent:		
New Registered Office Address:	Enter Flo	rida street address
		, Florida
	City	Zip 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>	Name	Address	Type of Action
	DuVal, Stephen J.	428 Walnut Street Green Cove Springs, FL 32043	_ ☐ Add ☐ Remove
	KoMa Holdings, LLC	428 Walnut Street Green Cove Springs, FL 32043	_
			_
			∠ ☐ 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:

0	This Limited Partnersh	ip hereby elects to be a	"Limited Liability Limited	Partnership."

Q 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, enter cha	nge(s) here: (Attach additional sheets, if necessary.)
Effective date, if other than the date of filing: (Effective date cannot be prior to nor more than 90 days after State.)	the date this document is filed by the Florida Department of
Note: If the date inserted in this block does not meet the applicate be listed as the document's effective date on the Department of	
Signature(s) of a general partner or all general p	artners*:
(*NOTE: Only one current general partner is required to sign removing a "limited liability limited partnership" election state when adding or removing a "limited liability limited partnersh	ement. Chapter 620, F.S., requires all general partners to sign
• • • • • • • • • • • • • • • • • • • •	
Mark M Dul	17256 Z
Signature(s) of all new or dissociating general pa	rtner(s), if any:
Slevi	
Uiling Foot	
Filing Fee: \$52.50 Certified Copy (optional): \$52.50	
Certificate of Status (optional): \$8.75	