

A0300000 1397

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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2012 JAN 27 PM 2:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. BRYAN

JAN 30 2012

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CRT BFC, LTD.
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:

Indira Negron
Contact Person

C/O DRA Advisors LLC
Firm/Company

220 East 42nd Street, 27th Floor
Address

New York, NY 10017
City, State and Zip Code

inegron@draadvisors.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Indira Negron at (212) 973-3857
Name of Contact Person Area Code and Daytime 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:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:
Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

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2012 JAN 27 PM 2:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 19, 2012

INDIRA NEGRON
C/O DRA ADVISORS LLC
220 EAST 42ND STREET, 27TH FLOOR
NEW YORK, NY 10017

SUBJECT: CRT BFC, LTD.
Ref. Number: A03000001397

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2012 JAN 21 PM 2:50
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

We have received your document for CRT BFC, LTD. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by the dissociating general partner unless the document states the general partner is deceased or a guardian or general conservator has been appointed or the general partner previously filed a Statement of Dissociation with the Florida Department of State.

We have to have the reinstatement form with fee of \$5,000.00 along with amendment form, they have to be filed together.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan
Regulatory Specialist II

Letter Number: 612A00001302

DRA ADVISORS LLC
220 East 42nd Street, 27th Floor
New York, New York 10017
(212) 697-4740

January 24, 2012

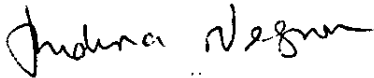
Division of Corporations
Attn: Joey Bryan
P.O. Box 6327
Tallahassee, FL 32314

RE: CRT BFC, LTD.
Ref. Number: A03000001397

Dear Joey:

Attached is a corrected Certificate of Amendment for the above mentioned entity. CRT BFC, LTD. has already filed for reinstatement online (see attached form) and paid the necessary fee. If you have any questions, please do not hesitate to call me at (212) 697-4740.

Sincerely,



Indira Negrón
Tax Manager

Enclosures

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2012 JAN 27 PM 2:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CERTIFICATE OF AMENDMENT
TO
CERTIFICATE OF LIMITED PARTNERSHIP
OF

CRT B FC, Ltd.

Insert name currently on file with Florida Department of State

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2012 JAN 27 PM 2:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 620.1202, Florida Statutes, this Florida limited partnership or limited liability limited partnership, whose certificate was filed with the Florida Department of State on 9/25/03, assigned Florida document number A03000001397, 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 limited partnership or limited liability limited partnership here:

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 LLLP.

B. If amending mailing address and/or principal office address, enter new mailing address and/or principal office address here:

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 office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

_____, Florida _____

City

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.

2012 JAN 27 PM 3:50
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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>	<u>Type of Action</u>
GP	Rodger BFC GP, LLC	225 NE 225 Mizner Blvd, Suite 200 Boca Raton, FL 33432	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
GP	CRT BFC GP, LLC #L03000036609	C/DRA Advisors LLC 220 E. 42nd St., 27th FL New York, NY 10017	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> 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.)*

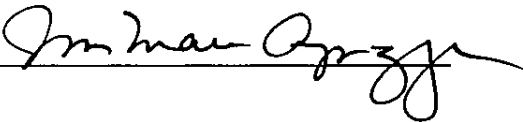
F. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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2012 JAN 27 PM 2:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA


Effective date, if other than the date of filing: _____
(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

Signature(s) of a general partner or all general partners*:

(*NOTE: Only one current general partner is required to sign this document unless the limited partnership is adding or removing a "limited liability limited partnership" election statement. Chapter 620, F.S., requires all general partners to sign when adding or removing a "limited liability limited partnership" election statement.)



Signature(s) of all new or dissociating general partner(s), if any:



Filing Fee: \$52.50
Certified Copy (optional): \$52.50
Certificate of Status (optional): \$8.75