

A06000000243

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

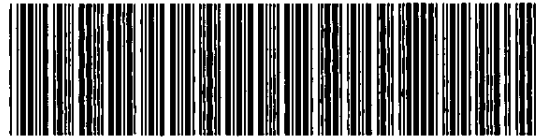
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

ROSA QAVE
AUTHORIZATION BY PHONE TO
CORRECT clarity part D
DATE 10/19/09
DOC. EXAM

Office Use Only



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FILED
09 OCT 15 AM 10:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Collins OCT 19 2009



October 12, 2009

FLORIDA DEPARTMENT OF STATE
Registration Section
Division of Corporations
Clifron Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: Articles of Amendment

Dear Sirs:

Enclosed please find the Certificate of Amendment to Certificate of Limited of Partnership for the following LP.:

KAPAX Real Estate Fund I, L.P. - A06000000243

We are including a check in the amount of \$ 61.25 to pay for the filing fee and Certificate of Status .

Please send us the Certificate of Status in the enclosed Federal Express envelope.

Should you require anything further for the Amendment, please contact me at (305) 459-5352.

Thank you very much for your prompt attention to this matter.

Sincerely,

A handwritten signature in black ink, appearing to read "R. Rivaflecha".

Rosa Rivaflecha
Corporate and Clients Department Assistant

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: KAPAX REAL ESTATE FUND I, L.P.
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:

ROSA RIVAFLECHA
Contact Person

PRS INTERNATIONAL
Firm/Company

801 BRICKELL AVE., 16TH FLOOR
Address

MIAMI, FL 33131
City, State and Zip Code

r.rivaflecha@prsint.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rosa Rivaflecha at (305) 381-8340
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

CERTIFICATE OF AMENDMENT
TO
CERTIFICATE OF LIMITED PARTNERSHIP
OF

KAPAX REAL ESTATE FUND I, L.P.

Insert name currently on file with Florida Department of State

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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 2/13/2006, assigned Florida document number A06000000243, 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:

Name remains the same

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:

<u>New Principal Office Address:</u> (Must be STREET address)	<u>801 Brickell Avenue</u> <u>16th Floor</u> <u>Miami, FL 33131</u>
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<u>New Mailing Address:</u> (May be post office box)	<u>801 Brickell Avenue</u> <u>16th Floor</u> <u>Miami, FL 33131</u>
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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:

<u>Name of New Registered Agent:</u>	<u>Gerald Wood</u>
<u>New Registered Office Address:</u>	<u>801 Brickell Avenue, 16th Floor</u> <i>Enter Florida street address</i> <u>Miami</u> , Florida <u>33131</u> <i>City</i> <i>Zip Code</i>

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 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>
_____	_____	500 S. Dixie Highway Suite 304 Coral Gables, FL 33146	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
_____	_____	801 Brickell Avenue 16th Floor Miami, FL 33131	<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.)

changing address of GP

Effective date, if other than the date of filing: _____

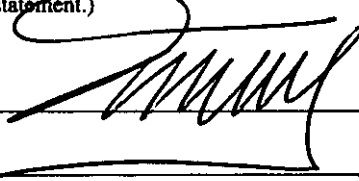
(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

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.)

Fernando Rodriguez Vila

as Manager of KAPAX REGPI, LLC.



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

Gerald Wood



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

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