

ADL0000001278

(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:

Office Use Only

G. MCLEOD

AUG - 6 2008

EXAMINER



700133968447

08/05/08--01018--010 **105.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 AUG -5 AM 11:30

LAW OFFICES
Reichstein and Lapat
an association of individual attorneys

3300 University Drive
Suite 311
Coral Springs, Florida 33065
(954) 345-6442
(954) 344-0288 (Fax)

221 North La Salle Street
Suite 1137
Chicago, Illinois 60601
(312) 425-2900
(312) 425-2901(Fax)

Please Reply to Florida Office

Michael Lapat
admitted to Practice in:
Florida, Illinois & New York
mlapat@nysbar.com

July 10, 2008

Florida Secretary of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

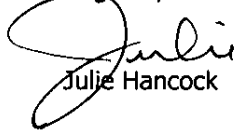
**RE: CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP
CRATER LAKE CAPITAL PARTNERS, L.P. \$ 105.00**

Dear Sir or Madam,

Please find enclosed herewith Certificate of Amendment to Certificate of Limited Partnership documents for the above referenced entity. Accompanying this submission is a **check in the sum of \$105.00** representing the filing fee for this formation.

Please file the foregoing as appropriate and return to this office file-stamped/certified copies of same as receipt thereof.

Regards,


Julie Hancock

jh
enclosure

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CRATER LAKE CAPITAL PARTNERS, 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:

MICHAEL LAPAT
(Contact Person)

LAW OFFICES OF MICHAEL LAPAT
(Firm/Company)

3300 UNIVERSITY DRIVE, SUITE 311
(Address)

CORAL SPRINGS FL 33065
(City, State and Zip Code)

For further information concerning this matter, please call:

JULIE HANCOCK at (954) 345-6442
(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**

SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 AUG -5 AM 11:30

CRATER LAKE CAPITAL PARTNERS, L.P.

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

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 _____, 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 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: 723 S. E. 13TH STREET
(Enter Florida street address)

FT. LAUDERDALE, Florida 33316
(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.

(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>	<u>Type of Action</u>
GP	CRATER LAKE CAPITAL MANAGEMENT, LLC	1355 CAMELLIA CIRCLE WESTON FL 33326	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
GP	CRATER LAKE CAPITAL MANAGEMENT, LLC	723 S.E. 13TH ST. FT. LAUDERDALE FL 33316	<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

D. 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.)


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

PRINCIPAL OFFICE ADDRESS AND MAILING ADDRESS ARE TO CHANGE TO:
723 S.E. 13TH STREET
FT. LAUDERDALE FL 33316

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.)

 8/1/08

RUBEN ROZENTAL, MANAGER,
CRATER LAKE CAPITAL MANAGEMENT, LLC (GP)

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