

A07 000001381

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

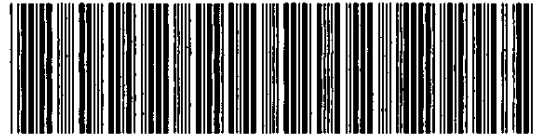
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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08/19/08--01028--016 \*\*215.00

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TALLAHASSEE, FLORIDA

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M. THOMAS

AUG 20 2008

EXAMINER

A07-1381

*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](mailto:mlapat@nysbar.com)

August 13, 2008

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

<b>RE:</b>	<b>TERRAVEST CAPITAL PARTNERS, L.P.</b>	<b>(LP)</b>	<b>\$105.00</b>
	<b>Amendment - name change - RIVERWOOD CAPITAL PARTNERS, L.P.</b>		
	<b>TERRAVEST CAPITAL MANAGEMENT, LLC (GP)</b>		<b>\$ 55.00</b>
	<b>Amendment - name change - RIVERWOOD CAPITAL MANAGEMENT, LLC</b>		
	<b>TERRAVEST CAPITAL ADVISORS, LLC</b>	<b>(IA)</b>	<b>\$ 55.00</b>
	<b>Amendment - name change - RIVERWOOD CAPITAL ADVISORS, LLC</b>		
			<b>\$ 215.00</b>

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08 AUG 19 AM 10:38

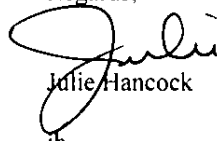
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Dear Sir or Madam,

Please find enclosed herewith amendment documents for the above-referenced entities. Accompanying these submissions is a **check in the sum of \$215.00** representing the filing fees for these formations.

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:** TERRAVEST 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 REICHSTEIN & 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)

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TALLAHASSEE, FLORIDA

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Enclosed is a check for the following amount:

- |   |   |   |   |
|---|---|---|---|
| <input type="checkbox"/> \$52.50 Filing Fee | <input type="checkbox"/> \$61.25 Filing Fee<br>and Certificate of<br>Status | <input checked="" type="checkbox"/> \$105.00 Filing Fee<br>and Certified Copy | <input type="checkbox"/> \$113.75 Filing Fee,<br>Certified Copy, and<br>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**

TERRAVEST 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 12-14-07, 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:**

RIVERWOOD CAPITAL PARTNERS, L.P.

(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: \_\_\_\_\_

(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.*

\_\_\_\_\_  
(If Changing Registered Agent, Signature of New Registered Agent)

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**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	TERRAVEST CAPITAL MANAGEMENT, LLC	3030 HARTLEY RD SUITE 250 JACKSONVILLE FL32259	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
GP	RIVERWOOD CAPITAL MANAGEMENT, LLC	3030 HARTLEY RD SUITE 250 JACKSONVILLE FL32259	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
	101-124678		<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

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**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.)**

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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.)



MITCH MALONE, MANAGER,  
RIVERWOOD CAPITAL MANAGEMENT, LLC (GP)

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

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TALLAHASSEE FLORIDA

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