

A09 000 000 020

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

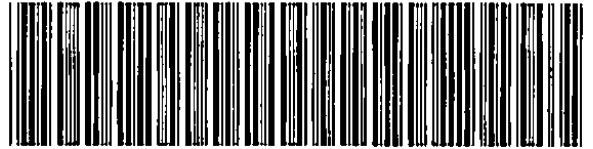
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



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2020 DEC 21 AM 10:56  
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TALLAHASSEE, FL

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DEC 21 2020



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 14, 2020

GARY KRAVETZ  
90 HINMAN ST  
CHESHIRE, CT 06410

SUBJECT: COVERED BRIDGE LIMITED PARTNERSHIP  
Ref. Number: A09000000020

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

DIVISION OF CORPORATION DO NOT FILE OPERATING AGREEMENTS, WE ONLY FILE ARTICLES OF AMENDMENT TO AN ENTITY.

To receive a refund, please submit a written request to the attention of the undersigned. Be sure to include the name of the person or entity the check should be made payable to and the address to which it should be mailed.

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) 245-6050.

Octavia L Simmons  
Regulatory Specialist II Supervisor

Letter Number: 220A00025046

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: COVERED BRIDGE LIMITED PARTNERSHIP

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:

GARY J. KRAVETZ

Contact Person

BAILLIE & HERSHMAN, P.C.

Firm/Company

90 HINMAN STREET

Address

CHESHIRE CT 06410

City, State and Zip Code

gkravetz@bhhlegal.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gary J. Kravetz

at (203) 272 7000

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

**Mailing Address:**

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

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

LED

CERTIFICATE OF AMENDMENT 2020 DEC 21 AM 10:56  
TO  
CERTIFICATE OF LIMITED PARTNERSHIP  
OF

STATE  
TALLAHASSEE, FL

COVERED BRIDGE LIMITED PARTNERSHIP

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 12/3/2008, assigned Florida document number A09000000020, 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

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**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>
_____	_____	_____ _____ _____	<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
_____	_____	_____ _____ _____	<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.)**

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

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DEPARTMENT OF STATE  
TALLAHASSEE, FL


Effective date, if other than the date of filing: OCTOBER 27, 2020  
(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

**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.)

Patriot Indiana Corporation, General Partner

By:   
Harriett Rostoff, President

**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

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AMENDMENT TO THE CERTIFICATE OF COVERED BRIDGE LIMITED PARTNERSHIP

FKA TANGLEWOOD LIMITED PARTNERSHIP

SECTION 15.1 STATE  
TALLAHASSEE, FL

The provisions in that Certain Amendment to the Certificate of Covered Bridge Limited Partnership FKA Tanglewood Limited Partnership dated May 9, 2013 is hereby further amended and changed as follows:

Section 4.2 "SPE Provisions" are hereby deleted in their entirety. In furtherance of such deletion the Partnership states that it no longer has the debt referred to in the earlier Amendment to Cantor Commercial Real Estate Lending, LP., at the current time has no debt to any lender and accordingly any earlier requirement for an independent director is no longer in place and the independent director did resign.

By removing the provisions above, the Partnership also hereby amends Section 1.3 of the Agreement of Tanglewood Limited Partnership as follows:

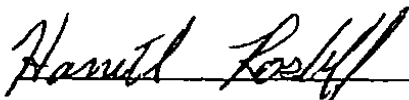
Section 1.3 is hereby deleted and replaced with the following:

The purpose and business of the Partnership is to engage in the purchase, management, sale, development, of real estate, real estate related investments, or any other type of lawful business, including owning subsidiary companies, incurring or guaranteeing any debt.

Executed this 27th day of October, 2020

Covered Bridge Limited Partnership

By: Patriot Indiana Corporation, its General Partner



Harriett Rostoff, President, duly authorized.