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Account Number : I20050000029 Phone : (727)896-7171 Fax Number : (727)820-0835

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ECRETARY OF STATE

LP/LLLP AMENDMENT/RESTATEMENT/CORRECTION WRH TAMARIND BAY, LLLP

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EXAMINER

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CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

SECRETARY OF STATE TALLAHASSEE.FLORIDA

- WRH TAM	ARIND BAY, L	LLP
Insert name currently on	file with Florida Depar	riment of State
Pursuant to the provisions of section 620.1202, limited liability limited partnership, whose cert SEPTEMBER 16, 2009, assigned Fadopts the following certificate of amendment	ificate was filed wit florida document nu	th the Florida Department of State on mberA0900000664,
adopta the following certificate of antendment	to its continuate of t	inned pararership.
This amendment is submitted to amend the following	g:	
A. If amending name, enter the new name of the here;	e limited partnershi)	or limited liability limited partnership
WRH BOO	T RANCH, LLI	_P
Now name must be distingu		
Acceptable Limited Partnership suffixes: Limited Partne Acceptable Limited Liability Limited Partnership suffixe	rship, Limited, L.P., LF s: Limited Liability Lim	. or Ltd. fud Parmership, L.L.L.P. or LLLP.
B. If amending mailing address and/or prin principal office address here:	cipal office addres	s, enter new mailing address and/or
New Principal Office Address:		
(Must be STREET address)		
		4
New Malling Address: (May be post office box)		
C. If amending the registered agent and/or reginew registered agent and/or the new registered of	stered office addres Tice address here:	s on our records, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:		
·	- Enter Flo	rida street address
***************************************		, Florida
	City	Zip Code
	_	

FILED (((H10000143138 3))) 2010 JUN 18 AM & 44

New Registered Agent's Signature, if changing Registered Agent:

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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: Title <u>Name</u> <u>Address</u> Type of Action Add Remove _l Add Remove Add Remove ___Add Remove ∐Add Remove Add 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.)

•	(((H10000143138 3)))					
F. If amending any other information	n, enter change(s) here: (Attach	additional shee	ets, if necessary.)		
ective date, if other than the date of f						
ective date, if other than the date of f active date cannot be prior to nor more than e.)	90 days after the d	ate this document	is filed by the Fi	ortda Department of		
nature(s) of a general partner or a	il general partn	ers*:				
OTE: Only one current general partner is re			e limited partne	orship is adding or		
oving a "limited liability limited partnership	" election statement	. Chapter 620, P.S.	S., requires all g	eneral partners to sign		
on adding or removing a "limited liability lim H PROPERTIES, INC.	nee betitietsinh of	coddii statement.)				
141						
J. Nark Rutledge, President						
	_					
	•					
nature(s) of all new or dissociating	general partne	r(s), if any:	•			
				41-71-71-71-71-71-71-71-71-71-71-71-71-71		
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