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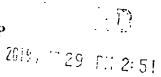
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COVER LETTER

TO: Registration Division of	Section Corporations				
	•				
SUBJECT: Sakoge		menometric on the instant the Wi			
IN	ancorrionda Limited Pa	rtnership or Limited Liabilit	y Limited Partnership		
The enclosed Certif	Teate of Amendment a	nd fee(s) are submitted	for filing.		
Please return all con	rrespondence concerni	ng this matter to:			
Marjoric Betti					
	Contact Person	_			
Hermelee Law PL					
	Firm/Company	· · · · · · · · · · · · · · · · · · ·			
2100 Coral Way, Suite	702				
	Address				
Miami, FL 33145					
	City, State and Zip Code				
marjorie@hermeleelav	v.com				
E-mail address: (t	o be used for future annual	report notification)			
For further information	tion concerning this m	atter, please call:			
Marjorie Betti		at (<u>305</u>) 748-6	6146		
Name of Cont	act Person		time Telephone Number		
Enclosed is a check	for the following amo	unt:			
S52.50 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 ADDRES	- · · · -	MAILING A	ADDRESS:		
Registration Section		Registration Section			
Division of Corpora Clifton Building	tions	Division of Corporations			
Cinton Bunding 2661 Executive Cer	iter Circle	P. O. Box 6327 Tallahassee, FL 32314			
Tallahassee, FL 32		i ananassee,	1 14 34317		

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP **OF**



Sakoge South 1 LLLP			
Insert name cui	rently on fi	ile with Florida De	partment of State .
adopts the following certificate of amer This amendment is submitted to amend the	ose certificing of the certification of the certifi	icate was filed v orida document its certificate o	with the Florida Department of State on number A10000000173
New partie must be	distinguist	rubla and contain	n acceptable suffix.
Acceptable Limited Partnership suffixes: Limite Acceptable Limited Liability Limited Partnership	d Partnersh	hip, Limited, L.P., .	LP. or Ltd.
B. If amending mailing address and/ principal office address here:	or princi	pal office addr	ess, enter new mailing address and/or
New Principal Office Add (Must be STREET address)	<u>lress:</u>	2410 SW 25th S Miami, FL 3313	
(man be STRELT address)		Wilditt, 1 E 3313	
New Mailing Address: (May be post office box)		2410 SW 25th S	_
		Miami, FL 3313	3
C. If amending the registered agent and new registered agent and/or the new regis	or registo	ered office addre ee address here:	ess on our records, enter the name of the
Name of New Registered Agent:	Hermel	lee Law PL	
New Registered Office Address:	2410 S	W 25th Street Enter F	lorida street address
	Miami		, Florida 33133
		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

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>	Address	Type of Action
<u>G</u>	Sakoge South LLC	101 N.E. 3rd Avenue, Suite 1110 Ft. Lauderdale, FL 33301	_
G	Sakoge South LLC	2410 SW 25th Street Miami, FL 33133	_ 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 elec	ts to be a "	Limited	Liability	l.imited	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 infor	mation, enter	change(s)	here: (Attac	h additional s	heets, if necessary.)
 					
Effective date, if other than the date (Effective date cannot be prior to nor mor	e of filing: e than 90 days a	fter the dat	e this docume	nt is filed by th	P Florida Department of
State.) Note: If the date inserted in this block doe be listed as the document's effective date				requirements, t	his date will not
Signature(s) of a general partner	or all genera	ıl part <u>ne</u>	rs*:		
(*NOTE: Only one current general partn removing a "limited liability limited partn when adding or removing a "limited liabil" School South, LLC?	ership" election	statement.	Chapter 620,	F.S., requires a	
y Bu 6 Hale, V	h.				
1	•				
					_
			-		
Signature(s) of all new or dissoci	ating general	partner	(s), if any :		
					
				<u></u>	
Filing Fee:	\$52.50				
Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$52.50 \$8.75				