Florida Department of State Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : TRENAM, KEMKER, SCHARF, BARKIN, FRYE, O'NEILL & MULLIS, P.A.

Account Number : 076424003301 Phone : (813)223-7474

Fax Number : (813)227-0435 20-1148/DLH

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

GARDNER FAMILY LIMITED PARTNERSHIP

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CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

Or	
e with Florida Depart	ment of State
cate was filed with rida document nui	s Florida limited partnership or a the Florida Department of State on the A10000000389, mited partnership.
mited partnership	or limited liability limited partnership
able and contain an a	cceptable suffix.
ip, Limited, L.P., LP. Jimited Liability Limi	or Ltd. ted Partnership, L.L.L.P. or LLLP.
al office address	, enter new mailing address and/or
d office address on lress here:	our records, enter the name of the new

Euro Elo	: J
Enter Plot	uia siree) adaress
City	, Florida Zip Code
	orida Statutes, this cate was filed with ida document musts certificate of line milted partnership table and contain an action Limited Liability Limited Liability Limited and office address on tress here:

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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
	···6-···, <u></u>		2011

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>	Name	Address	Type of Action
<u>-</u>			
			□ 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.)

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F. If amending any other inform	nation, enter chai	nge(s) here: (Attach addition	al sheets, if necessary.)
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Effective date, if other than the date (Effective date cannot be prior to nor more	of filing: than 90 days after	the date this document is filed by	y the Florida Department of
State.) Note: If the date inserted in this block does	s not meet the applic	cable statutory filing requiremen	ts, this date will not
be listed as the document's effective date of	on the Department o	f State's records.	
71			
Signature(s) of a general partner			
(*NOTE: Only one current general partner removing a "limited liability limited partner."	er is required to sign	this document unless the limited	d partnership is adding or
when adding or removing a "limited liability limited parties"	ersnip election state ity limited partnersh	ip" election statement.)	es an general parmers to sign
	_		
Signature(s) of all new or dissocia	iting general pa	riner(s), if any:	
			
			
			
Filing Fee: Certified Copy (optional):	\$52.50 \$52.50		
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