Division of Corporations Electronic Filing Cover Sheet

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To: Division of Corporations fax Number : (850)617-6383 Account Name : BERGER-SINGERMAN-LLP-MIAMI From: Account Number : 120090000006 Phone : (305)755-9500 : (305)714-4340 Fax Number

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

Email Address:

LP/LLLP AMENDMENT/RESTATEMENT/CORRECTION SARANITI VENTURES LLLP

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CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

SARANITI VENTURES LLLP
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 August 12, 2011, assigned Florida document number
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
herc:
an accomple suffix
New name must be distinguishable and contain an acceptable suffix.
Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., I.P., or Ltd. Acceptable 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
City , Florida 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:

d or removed	l from our records:		
Title	<u>Name</u>	Address	Type of Action
<u>GP</u>	Shann M. Sarania as Trustice of the Sharon M. Saraniti Revocable Living Trust waid August 11, 2011	141 Ocean Beach Trail Vero Beach, FL 32963	Add Remove
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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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