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MAY 20 2019 S. YOUNG

### COVER LETTER . . .

Division of Corporations				
SUBJECT: Ba	ytree On Baymeadows, Ltd.			
	Name of Florida Limited F	Partnership or Limited Liabili	ty Limited Partnership	
The enclosed C	ertificate of Amendment	and fee(s) are submitted	for filing.	
Please return al	l correspondence concerr	ning this matter to:		
Thomas Adamson	Braxton			
	Contact Person			
Duke Properties, I	nc.			
	Firm/Company			
437 E. Monroe Str	reet, Ste. 1			
	Address	<del></del>		
Jacksonville, FL	32202			
	City, State and Zip Code			
adamsondukeproj	o@yahoo.com			
E-mail addre	ss: (to be used for future annu	al report notification)		
For further info	rmation concerning this t	natter, please call:		
David II. Peek		at ( ) 346-	346-5545	
Name of Contact Person			time Telephone Number	
Enclosed is a cl	neck for the following an	iount:		
■ \$52.50 Filing F	ee S61.25 Filing Fee and Certificate of Status	□\$105.00 Filing Fee and Certified Copy	☐S113.75 Filing Fee, Certified Copy, and Certificate of Status	
STREET ADD	RESS:	MAILING	ADDRESS:	
Registration Section		Registration		
Division of Corporations			Corporations	
Clifton Building			P. O. Box 6327	
2661 Executive Tallahassee, FL		Tallahassee,	FL 32314	
rananassee, r.L.	242VI			

#### CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

Baytree On Baymeadows, Ltd.		
Insert name currently on f	ile with Florida Dep	artment of State
Pursuant to the provisions of section 620.1202, Flimited liability limited partnership, whose certif November 19, 2012, assigned Floadopts the following certificate of amendment to	icate was filed worlda document n	ith the Florida Department of State on umber A12000000711
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the here:	limited partnersh	ip or limited liability limited partnership
New name must be distinguis	hable and contain ar	acceptable suffix.
Acceptable Limited Partnership suffixes: Limited Partners Acceptable Limited Liability Limited Partnership suffixes:	hip, Limited, L.P., L Limited Liability Li.	P, or Ltd. nited Partnership, L.L.L.P. or LLLP.
B. If amending mailing address and/or principal office address here:	ipal office addre	ss, enter new mailing address and/or
New Principal Office Address: (Must be STREET address)		
New Mailing Address: (May be post office box)		<u> </u>
C. If amending the registered agent and/or registered agent and/or the new registered officered of the new registered of the new rea	ered office addre	ss on our records, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Fl	orida street address
		, Florida
	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 Charling Declared A is City of City of the Land		
If Changing Registered Agent, Signature of New Registered Age	ent	zent

## 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>GP</u>	Duke Properties, Inc.	437 E. Monroe Street, Ste. 1 Jacksonville, FL 32202	Add Remove
<u>GP</u>	Lynwood G. Willis	437 E. Monroe Street, Ste. 1 Jacksonville, FL 32202	_ □ Add _ ■ Remove
<u>GP</u>	Robert H. Still	437 E. Monroe Street, Ste. 1 Jacksonville, FL 32202	_
			_
			_
			_

- 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.)

F. If amending any other information, enter c	hange(s) here: (Attach additional sheets, if necessary.)
Totalia dan isaharaharaharaharaharah	
Effective date, if other than the date of filing: (Effective date cannot be prior to nor more than 90 days aft	ter the date this document is filed by the Florida Department of
State.)  Note: If the date inserted in this block does not meet the apple listed as the document's effective date on the Departmen	plicable statutory filing requirements, this date will not
be fished as the document's effective date on the Departmen	i of state's records.
Signature(a) of a governed manter or all manual	
Signature(s) of a general partner or all general	
(*NOTE: Only one current general partner is required to si removing a "limited liability limited partnership" election st when adding or removing a "limited liability limited partner	ign this document unless the limited partnership is adding or tatement. Chapter 620, F.S., requires all general partners to sign rship" election statement.)
Ou Achina	
Robert H. Still	Thomas Braxton Adamson, Personal Representative
	of the Estate of Lynwood G. Willis, deceased
Signature(s) of all new or dissociating general p	partner(s), if any:
Duke Properties, Inc.	
By: Thomas Braxton-Adamson, President	
Filing Fee: \$52.50	
Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75	