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Florida Department of State
 Division of Corporations
 Electronic Filing Cover Sheet

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((H130001715873)))



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To:

Division of Corporations
 Fax Number : (850) 617-6383

From:

Account Name : GARY, DYTRECH & RYAN, P.A.
 Account Number : I19990000255
 Phone : (561) 844-3700
 Fax Number : (561) 844-2388

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

Email Address: AND@GDR-LAW.COM

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SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

LP/LLP AMENDMENT/RESTATEMENT/CORRECTION

SBBG, LLLP

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$52.50

2013 AUG - 1 AM 8:43
 TALLAHASSEE, FLORIDA
 SECRETARY OF STATE

FILED
 8/13/2013

B. BOSTICK

AUG - 2 2013

EXAMINER

((H13000171587 3)))

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

SBBG, 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 04/26/2013, assigned Florida document number A1300000223, adopts the following certificate of amendment to its certificate of limited partnership.

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 here:

New name must be distinguishable and contain an acceptable suffix.

Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.

Acceptable Limited Liability 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 Addresses:

(Must be STREET address)

New Mailing Address:

Now trading at Post Office
(May be post office box)

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

City _____, Florida _____
Zip Code _____

City

Zip Codes

Page 1 of 3

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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:

Title	Name	Address	Type of Action
General Partner	Michael Smolak	7711 N. Military Trail Suite 212 Palm Beach Gardens, FL 33410	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> 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.)

08-01-2013 02:59PM FROM-GARYDTRYCHRYAN

+5618441064

T-286 P.004/004 F-602

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F. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

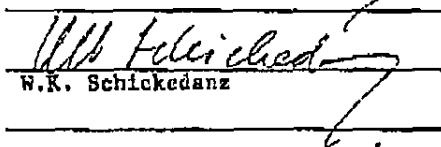
Effective date, if other than the date of filing:

(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

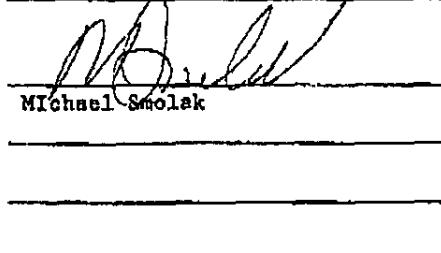
Signature(s) of a general partner or all general partners*:

(*NOTE: Only one current general partner is required to sign this document unless the limited partnership is adding or removing a "limited liability limited partnership" election statement. Chapter 620, F.S., requires all general partners to sign when adding or removing a "limited liability limited partnership" election statement.)


Gerhard H. Schickedanz


W.K. Schickedanz

Signature(s) of all new or dissociating general partner(s), if any:


Michael Smolak

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Filing Fee: \$52.50
Certified Copy (optional): \$52.50
Certificate of Status (optional): \$8.75