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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : NICI LAW FIRM, P.L.

Account Number : I20110000008 : (239)449-6150 Fax Number : (877)646-0560

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

Email Address:

P/LLLP AMENDMENT/RESTATEMENT/CORRECTION **BODMAN FAMILY LIMITED PARTNERSHIP**

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CERTIFICATE OF AMENDMENT

CERTIFICATE O	F LIMITED PAR OF	TNERSHIP
Bodman Fam Insert name currently or	nily Limited Par	
Pursuant to the provisions of section 620.1202 limited liability limited partnership, whose centary 10/5/16, assigned I adopts the following certificate of amendment	tificate was filed w Florida document r	with the Florida Department of State on number A1600000539
This amendment is submitted to amend the following	og:	
A. If amending name, enter the new name of the here:	ne limited partnersh	ip or limited liability limited partnership
Gambit Capita	al Limited Part	
Acceptable Limited Liability Limited Partnership suffixe B. If amending mailing address and/or principal office address here: New Principal Office Address: (Must be STREET address)		·
New Mailing Address: (May be post office box)		17 /H 8: 35
C. If amending the registered agent and/or reg new registered agent and/or the new registered o		•1-
Name of New Registered Agent:		
New Registered Office Address:	Enter F	lorida street address
	City	, Florida Zip Code

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13:43 PDT

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Page:

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>	Name	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
			Add S
-			Add Remove &
			Add C
ed partnership	artnership or limited liability " status, enter change here:		

E. If limite

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 information, er	ner change(s) nere: [Attach addition	mui sneets, ij necessury.j
Effective date, if other than the date of filing	•	
Effective date, if other than the date of filing (Effective date cannot be prior to nor more than 90 di State.)	ays after the date this document is filed	by the Florida Department of
Signature(s) of a general partner or all ge	neral partners*:	
(*NOTE: Only one current general partner is require removing a "limited liability limited partnership" elect when adding or removing a "limited liability limited.	tion statement. Chapter 620, F.S., requ	ited partnership is adding or uires all general partners to sign
Richard S. Bodma	 	
2 July		
	<u></u> .	
Signature(s) of all new or dissociating gen	eral partner(s), if any:	
		,
E11' E 652 50		
Filing Fee: \$52.50 Certified Copy (optional): \$52.50		007
Certificate of Status (optional): \$8.75		
		
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