Division of Corporations Electronic Filing Cover Sheet

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(((H16000281729 3)))



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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : MURAI, WALD, BIONDO, MORENO,

Account Number: 076150002103

: (305)444-0101

Phone Fax Number

: (305)444-0174

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

P/LLLP AMENDMENT/RESTATEMENT/CORRECTION KING OF PRUSSIA, LLLP

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 05 |
| Estimated Charge | \$52.50 |

K. SALY NOV 16 2016

Electronic Filing Menu

Corporate Filing Menu

Help

From:

Fax Audit No: H16000281729 3

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

| CERTIFICATE O | F LIMITED PARTNERSHIP OF | |
|---|---|---|
| KING O | F PRUSSIA, LLLP | |
| | n file with Florida Department of State | |
| limited liability limited partnership, whose cert | OF F PRUSSIA, LLLP In file with Florida Department of State Florida Statutes, this Florida limited partnership or difficate was filed with the Florida Department of State on Florida document number A16000000599 To its certificate of limited partnership. | } |
| adopts the following certificate of amendment | o its certificate of limited partnership. | |
| This amendment is submitted to amend the following | | |
| A. If amending name, enter the new name of the here: | limited partnership or limited liability limited partnership | |
| New name must be distingul | shable and contain an acceptable suffix, | |
| · · · · · · | Limited Liability Limited Partnership, L.L. L.P. or LLLP. | |
| B. If amending mailing address and/or princ principal office address here: | ipal office address, <u>enter new mailing address and/or</u> | |
| New Principal Office Address: (Must be STREET address) | | |
| New Mailing Address: (May be post office bax) | | { |
| C. If amending the registered agent and/or registened new registered agent and/or the new registered office | ered office address on our records, enter the name of the eaddress here: | |
| Name of New Registered Agent: | | |
| New Registered Office Address: | | |
| | Enter Floridu street address | |
| · | City Zip Code | |

Page 1 of 3

Fax Audit No: H16000281729 3

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 | Nams | Address | Type of Action | وك ا |
|----------------|--|---|----------------------------|---------|
| <u>GP</u> | Morgan King of Prussia GP, LLC | 1080 Pittsford Victor Road Pittsford, NY 14534 | Add PC | FILE |
| | | | Add SS | |
| | | | Add Remove | Fig. 27 |
| | | | Add Remove | 3 |
| | | | Add Remove | |
| | - | | Add Remove | |
| | partnership or limited Hability li ip" status, enter change here: | mited partnership is amendi | ng its "limited liability | |
| This Limited | d Partnership hereby elects to be a ". | Limited Liability Limited Parts | tership." | |
| This Limited | d Partnership hereby removes its "L | imited Liability Limited Partne | ership" status. | |
| i if adding or | removing" limited liability limited partne | rship" status, all general partners | must sign this amendment.) | |
| | Page 2 | 2 of 3 | | |

Fax Audit No: H16000281729 3

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|---|--|---|---|-----------|
| | | | MAPS St. | 5 7 |
| Effective date, if other than th (Effective date cannot be prior to no State.) | e date of filing: or more than 90 days afte | er the date this document is filed by the Fl | orida Department of | 10:28 |
| Signature(s) of a general par | tner or all general : | partners*: | | ingra |
| (*NOTE: Only one current general removing a "limited liability limited when adding or removing a "limited | partnership" election sta- | n this document unless the limited partner tement. Chapter 620, F.S., requires all ge hip" election statement.) | ship is adding or neral partners to sign | |
| Lecesse King of Prussia GP, LLC | | | | |
| | | 1. | | |
| | | | | |
| | | | · · · · · · · · · · · · · · · · · · · | : |
| Bignature(s) of all new or diss | ociating general pa | rtner(s), if any: | | |
| Morgan King of Prassia GP, LLC | | | | |
| _/ | | | | |
| <u> </u> | <u>.</u> | | | |
| | | | | |
| iling Fee: | \$52,50 | | | |
| ertified Copy (optional): | \$52.50 | | | |

From:

Fax Audit No: H16000281729 3

| F. If amending any other information, cuter change(s) here: (Attach additional s. | theets, if necessary.) |
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| | 100 |
| 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 | 270 2 |
| (Effective date cannot be prior to nor more than 90 days after the date this document is filed by the State) | (V, 5). |
| Signature(s) of a general partner or all general partners*; | SEE. FLORESTA |
| (*NOTE: Only one current general partner is required to sign this document unless the limited partner is required to sign this document unless the limited partnership" election statement. Chapter 620, F.S., requires all when adding or removing a "limited liability limited partnership" election statement.) | mership is adding or general partners to sign |
| Lecesse King of Prissia GP, LLC | |
| A | |
| | |
| John Flynn | |
| <u></u> | |
| lignature(s) of all new or dissociating general partner(s), if any: | |
| forgan King of Prissia GP, LLC | |
| | |
| | |
| | |
| | |
| | • |
| lling Fee: \$52.50 | |
| ertified Copy (optional): \$52.50 ertificate of Status (optional): \$8.75 | : |