A19000000 205

(Requestor's Name) - (APITAL ON VENTUROS - 3203 Lawton Rd Steloo _ Orlando PL 32803)	800340187808	
(City/State/Zip/Phone #)	0 2/05/20~-0	1011014 ** 61.25
(Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer.	S TALLENT MAR 0 4 2020	2020 FEB - 5 AM 7: 4 2
Office Use Only		

CERTIFICATE OF AMENDMENT TO ... CERTIFICATE OF LIMITED PARTNERSHIP OF

GALO SPI	ECIALTY FUND L	LLP	
Insert name currently on	tile with Florida De	epartment of State	
Pursuant to the provisions of section 620.1202, limited liability limited partnership, whose certi May 16, 2019, assigned Fadopts the following certificate of amendment t	ficate was filed lorida document	with the Florida Department of S number <u>A1900000205</u>	
This amendment is submitted to amend the following			
A. If amending name, <u>enter the new name of the here</u> :	limited partners	ship or limited liability limited par	tnership
New name must be distingui	shable and contain	an acceptable suffix.	
Acceptable Limited Partnership suffixes: Limited Partner Acceptable Limited Liability Limited Partnership suffixes			
B. If amending mailing address and/or princ principal office address here:	cipal office addi	ress, <u>enter new mailing address</u>	and/or
New Principal Office Address: (Must be STREET address)		20/21/15/10	1
New Mailing Address: (May be post office box)			
C. If amending the registered agent and/or regis new registered agent and/or the new registered off		ess on our records, enter the nan	re of the
Name of New Registered Agent:			
New Registered Office Address:	Enter i	Florida 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 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☐ ☐ Remove
			_

- 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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Effective date, if other than the date of filing: (Effective date cannot be prior to nor more than 90 days after State.)	er the date this document is filed by the Florida Department of
Note: If the date inserted in this block does not meet the app be listed as the document's effective date on the Department	
be used as the document's cricetive date on the Department	TO State S records.
Signature(s) of a general partner or all general	partners*:
(*NOTE: Only one current general partner is required to sign removing a "limited liability limited partnership" election st when adding or removing a "limited liability limited partner	atement. Chapter 620, F.S., requires all general partners to sign
Capital Q Management LLC. General Partner	Bruno Quatrini
By My TW	Bruno Quatrini
Manager	1220100000
Nanager	manager
Mquatrinia capital q VENTURES	. con
Signature(s) of all new or dissociating general p	
Signature(s) of an new of dissociating general p	earther(s), if any
	
Filing Fee: S52.50 Certified Copy (optional): S52.50	
Certificate of Status (optional): (\$8.75)	