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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107

Fax Number : (561)214-8442

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

Email	Address:				

LP/LLLP AMENDMENT/RESTATEMENT/CORRECTION SPOONBILL 35, LP

Certificate of Status	0
Certified Copy	0
Page Count	-01.4
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HelM. SOLOMON

JAN 2 U 2023

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

SPOONBILL 35, LP	
Insert name currently on file	e with Florida Department of State
Pursuant to the provisions of section 620.1202, Flamited liability limited partnership, whose certificate of amendment to it adopts the following certificate of amendment to it.	cate was filed with the Florida Department of State on rida document number A22000000287
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the li	mited partnership or limited liability limited partnership
35 SPOONBILL, LP	
New name must be distinguished	able and contain an acceptable suffix.
Acceptable Limited Partnership suffixes: Limited Partnersh. Acceptable Limited Liability Limited Partnership suffixes: L	
B. If amending mailing address and/or principal office address here:	oal office address, enter new mailing address and/or
New Principal Office Address: (Must be STREET address)	2023 JAH 19
New Mailing Address: (May be post office box)	
C. If amending the registered agent and/or registere registered agent and/or the new registered office add	d office address on our records, enter the name of the new dress here:
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	Elorido
	, 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> <u>Name</u>		Address	Type of Action			
			Add 20 Remoye 20 23			
						
			O Add O Remove			
		<u> </u>	_ □ 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.)

F. If amending any other info	rmation, en	ter change(s)	here: (Attach	additional she	ets, if necessai	עי.)
		···	,			
	.		<u>.</u>			
		<u>-</u>				
	, <u></u>					
Effective date, if other than the da (Effective date cannot be prior to nor mo	te of filing: ore than 90 da	ys after the da	te this document	is filed by the F	lorida Departn	tent of
State.) Note: If the date inserted in this block do	es not meet th	he applicable s	tatutory filing re	quirements, this	date will not	
be listed as the document's effective date	on the Depar	rtment of State	's records.	•		
Signature(s) of a general partne	r or all gen	eral partne	<u>rs*:</u>			
(*NOTE: Only one current general part				he limited partn	ership is adding	វល
removing a "limited liability limited part when adding or removing a limited liab	nership" elect	ion statement.	Chapter 620, F.	S., requires all g	general partners	lo sign
A Note adding of technology in Indined Hall	nky nimeu pi	armership ele	citon statement.)			
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Signature(s) of all new or dissoc	iating gene	ral partner	(s), if any:			٠٠.
						
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1714 B						
Filing Fee: Certified Copy (optional):	\$52,50 \$52.50					
Certificate of Status (optional):	\$8.75					