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(Address)

(Address)

(City/State/Zip/Phone #)

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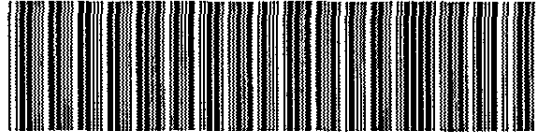
(Business Entity Name)

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A95-448
AK

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: River Falls Limited

(Name of Florida Limited Partnership or Limited Liability Limited Partnership)

The enclosed Certificate of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

John J. Kabboord, Jr.

(Contact Person)

John J. Kabboord, Jr., P.A.

(Firm/Company)

1980 N. Atlantic Avenue, Suite 801

(Address)

Cocoa Beach, Florida 32931

(City, State and Zip Code)

For further information concerning this matter, please call:

John J. Kabboord, Jr.

(Name of Contact Person)

at (321) 799-3388

(Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|---|---|---|---|
| <input type="checkbox"/> \$52.50 Filing Fee | <input type="checkbox"/> \$61.25 Filing Fee
and Certificate of
Status | <input checked="" type="checkbox"/> \$105.00 Filing Fee
and Certified Copy | <input type="checkbox"/> \$113.75 Filing Fee,
Certified Copy, and
Certificate of Status |
|---|---|---|---|

STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

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TALLAHASSEE, FL 32301

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

River Falls Limited

(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 April 27, 1995, adopts the following certificate of amendment to its certificate of limited partnership.

FIRST: Amendment(s): (Indicate information being amended, added, or deleted)

1. River Falls Limited is amended and elects to be a Limited Liability Limited Partnership.
2. The General Partner shall have Limited Liability.
3. The sole General Partner is hereby changed from Stanley Gal to John S. Gal, whose address is: 7 Cove View Court, Cocoa Beach, FL 32931.
4. The Limited Partners are amended to be: Mary Gal, Christine Gal and Dorothy Gal.
5. The new name shall be River Falls Limited, a Limited Liability Limited Partnership.

SECOND: Effective date, if other than the date of filing: Effective when permitted by law

(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(s)*:

(*Note: If adding or deleting an election to be a limited liability limited partnership statement, all general partners must sign the amendment.)

Stanley Gal

John S. Gal

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

Stanley Gal

John S. Gal

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

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