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COVER LETTER

TO: Registration Section				
Division of Corporations				
SUBJECT: BLACKSTONE ASSOCIATES				
Name of Florida Limited Partnership or Limited Liability L	imited Partnership			
The enclosed Certificate of Amendment and fee(s) are submitted for	r filing.			
Please return all correspondence concerning this matter to:				
CARMEN LAZAR Contact Person				
BLACKSTONE ASSOCIATES LTD				
Firm/Company				
· ·				
10877 WILSHIRE BLVD STE 1105 Address				
LOS ANGELES, CA 90024				
City, State and Zip Code				
CARMENSLAZAR@YAHOO.COM				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:	. L			
CARMEN S. LAZAR at (310)	393-9000 X /ol			
Name of Contact Person Area Code and Daytim	e Telephone Number			
Enclosed is a check for the following amount:				
	\$113.75 Filing Fee, Certified Copy, and Certificate of Status			
STREET ADDRESS: MAILING AD	DRESS:			
- · · · · · · · · · · · · · · · · · · ·	Registration Section			
	Division of Corporations			
	, 32314			
5	P. O. Box 6327 Tallahassee, FL 32314			

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

BLACKSTONE ASSOCIATES LTD

Insert name currently on file with Florida Department of State

Pursuant to the provisions of section 620.1202, Flimited liability limited partnership, whose certifities 7/25/1996, assigned Flo	cate was filed wi	th the Florida Department o	f State on
adopts the following certificate of amendment to			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the linere:	<u>ímited partnershi</u>	p or limited liability limited	<u>partnership</u>
New name must be distinguish	able and contain an	acceptable suffix.	
Acceptable Limited Partnership suffixes: Limited Partnersh Acceptable Limited Liability Limited Partnership suffixes: B. If amending mailing address and/or princip	Limited Liability Lim	nited Partnership, L.L.L.P. or LL.	
principal office address here:			
New Principal Office Address: (Must be STREET address)			_ _ _
New Mailing Address: (May be post office box)			<u>-</u>
C. If amending the registered agent and/or registenew registered agent and/or the new registered office	ered office addres e address here:	s on our records, enter the 1	name of the
Name of New Registered Agent:			_
New Registered Office Address:		2011	
	Enter Flo	rida street address, Florida SZip Code	
	City	Code 2: 00	ED

New Re	gistered Ag	ent's Signature, if changing	Registered Agent:	2016
comply w	vith the prov		t and agree to act in this capaci the proper and complete perfor osition as registered agent.	
			If Changing Registered Agent, Signa	ture of New Registered Agent
		general partner(s), enter the nom our records:	name and business address of e	ach general partner being
<u>Tit</u>	<u>le</u>	Name	Address	Type of Action
<u>G</u>	<u> </u>	ERI S. KROH	10877 WILSHIRE BLVD STE 1105 LOS ANGELES, CA 9002	Add Remove
G	<u>-</u>	PICO INVESTMENTS.	10877 WILSHIRE BLVD STE 1105 LOS ANGELES, CA 9002	Add ✓ Remove
				_ Add Remove
_				_ Add Remove
_	<u>_</u>		407	Add Remove
				_
		artnership or limited liability " status, enter change here:	limited partnership is amend	ding its "limited liability
Tì	is Limited I	Partnership hereby elects to be	a "Limited Liability Limited Pa	rtnership."
TI	nis Limited I	Partnership hereby removes its	"Limited Liability Limited Par	tnership" status.
(NOTE:	If adding or re	emoving" limited liability limited pa	rtnership" status, all general partne	rs must sign this amendment.)

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 days after the date this document is filed by the Florida Departmer State.) Signature(s) of a general partner or all general partners*: [*NOTE: Only one current general partner is required to sign this document unless the limited partnership is adding or removing a "limited liability limited partnership" election statement. Chapter 620, F.S., requires all general partners to when adding or removing a "limited liability limited partnership" election statement.) Ext. S. KROH, Sunce. Signature(s) of all new or dissociating general partner(s), if any: 2-19-16 Pico INNESTMENTS, INC. — Ga. S. KLOH, MANAGING. MEMBER. FOR PICO	F. If amending any other infor	mation enter c	hange(e) h	ores (Atta	ch additional	chapte if nacas	eamı)
(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department State.) Signature(s) of a general partner or all general partners*: (*NOTE: Only one current general partner is equired to sign this document unless the limited partnership is adding or removing a "limited liability limited partnership" election statement. Chapter 620, F.S., requires all general partners to when adding or removing a "limited liability limited partnership" election statement.) Exi S. KROH, owner. Signature(s) of all new or dissociating general partner(s), if any: Pico innestments, signature for pico	r. It amending any other infor	manon, enter c	mange(s) n	icic. (Alta	in additional	sneets, if neces.	sury.)
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Exi S. KROH, Sweet. Signature(s) of all new or dissociating general partner(s), if any: Signature(s) of all new or dissociating general partner(s), if any: Pico innestments, Inc. — Ghi S. KROH, MANAGING MEMBER. FOR Pico							
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Signature(s) of all new or dissociating general partner(s), if any: Pico innestments, Inc. — Ghi s. Kroh, made since Member. For pico	ignature(s) of a general partner	or all genera	L par tners	<u>3*:</u>			
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2016 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A96000001410

Entity Name: BLACKSTONE ASSOCIATES, LTD.

Current Principal Place of Business:

10877 WILSHIRE BOULEVARD SUITE 1105 LOS ANGELES, CA 90024

Current Mailing Address:

10877 WILSHIRE BOULEVARD SUITE 1105 LOS ANGELES, CA 90024

FEI Number: 95-4591668

Certificate of Status Desired: No

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FILED

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Jan 19, 2016 Secretary of State

Name and Address of Current Registered Agent:

NATIONAL CORPORATE RESEARCH,LTD.,INC. 115 NORTH CALHOUN ST. SUITE 4

TALLAHASSEE, FL 32301 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Fiorida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

General Partner Detail:

Document #

P96000058558

Name

PICO INVESTMENTS, INC.

Address

10877 WILSHIRE BLVD. #1105

City-State-Zip: LOS ANGELES CA 90024

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a general partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CARMEN LAZAR

ACCOUNTANT

01/19/2016