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COVER LETTER

TO: Registration Section Division of Corporations						
SUBJECT: WARM SPRINGS INVESTMENTS, LTD.						
N:	ame of Florida Limited Par	rtnership or Limited	l Liability	Limited Partnership		
The enclosed Certifi	icate of Amendment a	nd fee(s) are sub	mitted	for filing.		
Please return all cor	respondence concerni	ng this matter to	:			
JOHN TROUTMAN						
	Contact Person					
WARM SPRINGS INV	ESTMENTS, LTD.					
	Firm/Company					
3161 MICHELSON, ST	E. 425					
	Address					
IRVINE, CA 92612						
(City, State and Zip Code		_			
jtroutman@richlandinv	estments.com					
E-mail address: (to	be used for future annual	report notification)	_			
For further informat	ion concerning this ma	atter, please call:	<u>.</u>			
JOHN TROUTMAN		949 at (383-4	131		
Name of Conta	ct Person		and Dayti	me Telephone Number		
Enclosed is a check	for the following amo	unt:				
☐ \$52.50 Filing Fee	□\$105.00 Filing Fee and Certified Copy		S113.75 Filing Fee, Certified Copy, and Certificate of Status			
Mailing Address: Registration Section Division of Corporat P.O. Box 6327 Tallahassee, FL 323	Regist Divisi The C 2415 i	entre of N. Mon				

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF



WARM SPRINGS INVESTMENTS, LTD.

Insert name currently on file with Florida Department of State

Pursuant to the provisions of section 620.1202. I limited liability limited partnership, whose certif NOVEMBER 10, 1997, assigned Flo	ficate was filed wi	th the Florida Department of State on							
adopts the following certificate of amendment to its certificate of limited partnership.									
This amendment is submitted to amend the following:									
A. If amending name, <u>enter the new name of the here</u> :	limited partnershi	p or limited liability limited partnership							
New name must be distinguis	shable and contain an	acceptable suffix.							
Acceptable Limited Partnership suffixes: Limited Partners Acceptable Limited Liability Limited Partnership suffixes:									
B. If amending mailing address and/or principal office address here:	ipal office addres	ss, enter new mailing address and/or							
New Principal Office Address:	400 N. ASHLEY I	DRIVE							
(Must be STREET address)	SUITE 1750								
	TAMPA, FL 3360	2							
New Mailing Address:	400 N. ASHLEY I	DRIVE							
(May be post office box)	SUITE 1750								
	TAMPA, FL 3360	2							
C. If amending the registered agent and/or register registered agent and/or the new registered office ad		n our records, <u>enter the name of the new</u>							
Name of New Registered Agent:									
New Registered Office Address:									
	Enter Flo	orida 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 Popiet	erod Apont
it Changing Registered Agent,	Signature of New Regist	crea Argein

D. If	amending the	general	partner(s),	enter the	e name	and	business	address	of ea	ch s	general	<u>partner</u>	being
added	or removed fr	<u>om our r</u>	ecords:										

<u>Title</u>	<u>Name</u>	Address	Type of Action
			_
			_
			_
			_ □ 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:

u	This Limited F	Partnership h	iereby elects to be	e a "Limited Liabilit	y Limited Partnership.'
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☐ 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.)

• •	enter change(s) here: (Attach additional sheets, if necessary.) HTED PARTNERSHIP IS HEREBY AMENDED TO PROVIDE
AS FOLLOWS:	
"5. Term. The term for which the Partnership is to o	exist shall be forty (40) years from the filing of this Certificate in the
Office of the Secretary of State of the State of Flori	ida, unless sooner terminated in accordance with the Limited
Partnership Agreement for WARM SPRINGS INV	ESTMENTS, LTD."
State.)	days after the date this document is filed by the Florida Department of t the applicable statutory filing requirements, this date will not
	eneral partners*: red to sign this document unless the limited partnership is adding or ection statement. Chapter 620, F.S., requires all general partners to sign
By: John (. Trontma Vice President	ia, Inc.
Signature(s) of all new or dissociating gen	neral partner(s), if any:
Filing Fee: \$52.50 Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75	