A98000001083

Sam D. Norton (Requestor's Name)					
(Requestor's Name)					
Novton, Hammersley, Lopez & SKOKOS, P.A.					
1819 Main St., Suite 610 (Address)					
Sava 50 to 17 34236 (City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					





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IN SEP 29 PM 1: 27

J. BRYAN

SEP 3 0 2011

EXAMINER

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

		SHIP STATE OF State				
CER	TIFICATE OF AMENDMENT					
CERTIFIC	TO CATE OF LIMITED PARTNER	SHIP SHIP				
0	OF	The Same				
	Osprey, S.A., Ltd.	3630				
Insert name c	urrently on file with Florida Department	of State				
		(A)				
Pursuant to the provisions of section 6	20,1202, Florida Statutes, this Flor	rida limited partnership or				
limited liability limited partnership, when	imited liability limited partnership, whose certificate was filed with the Florida Department of State on					
May 1, 1998 , as	ssigned Florida document number	A98000001083				
adopts the following certificate of ame	endment to its certificate of limited	partnership.				
This amendment is submitted to amend the	following:					
A 16						
 A. If amending name, enter the new na here: 	ime of the limited partnership or lin	nited liability limited partnership				
Navy nama must k	oe distinguishable and contain an acceptal	ble cuffix				
Acceptable Limited Partnership suffixes: Limi Acceptable Limited Liability Limited Partners.	ted Partnership, Limited, L.P., LP, or Lta hip suffixes: Limited Liability Limited Pa	rtnarchin III P. or III P				
		•				
B. If amending mailing address and	or principal office address, ente	r new mailing address and/or				
principal office address here:						
New Principal Office Ac	ldress:					
(Must be STREET address)						
New Mailing Address:						
(May be post office box)						
,						
C. If amending the registered agent an	d/or registered office address on ou	ir records, enter the name of the				
new registered agent and/or the new regi		, 				
Name of New Registered Agent:	Sam Norton					
New Perfermed Office Add	1819 Main Street, Suite 61	 n				
New Registered Office Address: 1819 Main Street, Suite 610 Enter Florida street address						
		, Florida 34236-5974				
	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>l I</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
<u>GP</u>	Lyon Properties Associates, L.L.C.	2701 Troy Center Drive Suite 100 Troy, MI 48084	Add Remove
<u>GP</u>	Pandion Management LLC #MIIDCOCC 4917	1424 Straits Drive Bay City, MI 48706	SEP 29 PA
			Add Remove
			Add Remove
			Add Remove
	partnership or limited liabilit nip" status, enter change here:	y limited partnership is amer	nding its "limited liability
This Limite	ed Partnership hereby elects to be	e a "Limited Liability Limited P	artnership."
This Limite	ed Partnership hereby removes it	s "Limited Liability Limited Pa	rtnership" status.

(NOTE: If adding or removing" limited liability limited partnership" status, all general partners must sign this amendment.)

	The same
	7
Effective data if other than the data of Clina	
Effective date, if other than the date of filing: (Effective date cannot be prior to nor more than 90 days afte.	er the date this document is filed by the Florida Department of
State.)	
Signature(s) of a general partner or all general j	partners*:
(*NOTE: Only one current general partner is required to sig removing a "limited liability limited partnership" election sta when adding or removing a "limited liability limited partners Pandion Management LLC	tement. Chapter 620, F.S., requires all general partners to sign
By: Mark Lubienski Co-Manager	
By: Sullivan, Co-Manager	
Signature(s) of all new or dissociating general pa	artner(s), if any:
Lyon Properties, LLC	Pandion Management LLC
By: W	By:
Mickael Biber, Manager	Mary Lubienski Co-Manager
	Robert Sullivan, Co-Manage
Piling Pool	
Filing Fee: \$52.50 Certified Copy (optional): \$52.50	
Certificate of Status (optional): \$8.75	