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COVER LETTER

то:	Division of Co	orporations							
SUBJ	ECT: GATOR R	UE PARTNERS, LTD							
Name of Florida Limited Partnership or Limited Liability Limited Partnership									
The er	nclosed Certific	ate of Amendment and	fee(s) are su	ibmitted f	or filing.				
Please	return all corre	spondence concerning	this matter t	o:					
GARY	PRESTON								
		Contact Person							
GATO	R INVESTMENTS	S							
		Firm/Company							
7850 N	W 146TH STREE	T, FOURTH FLOOR							
		Address							
MIAM	I LAKES, FLORII	DA 33016							
	Ci	ity, State and Zip Code							
GPRE	STON@GATORI	NV.COM							
E	-mail address: (to b	be used for future annual re	port notification	n)					
For further information concerning this matter, please call:									
GARY PRESTON			_at (949-90	049. EXT. 162				
	Name of Contac	t Person		e and Daytii	me Telephone Number				
Enclo:	sed is a check fo	or the following amour	nt:						
= \$52	.50 Filing Fee	☐\$61.25 Filing Fee and Certificate of Status	S105.00 Fill and Certified		S113.75 Filing Fee, Certified Copy, and Certificate of Status				
Regist Divisi P.O. E	ng Address: tration Section ion of Corporati Box 6327 nassee, FL 3231		Reg Divi The 241:	Centre of	ection orporations Tallahassee oe Street, Suite 810				

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

GATOR RUE PARTNERS, LTD			
Insert name currently on fil	e with Florida Departmen	nt of State	
Pursuant to the provisions of section 620.1202, Flimited liability limited partnership, whose certifi MAY 8, 1998, assigned Floadopts the following certificate of amendment to	cate was filed with th rida document numbe	e Florida Department of S er A98000001163	
This amendment is submitted to amend the following:			
A. If amending name, <u>enter the new name of the l</u> here:	imited partnership or	limited liability limited par	rtnership
New name must be distinguish	nable and contain an accep	ptable suffix.	
Acceptable Limited Partnership suffixes: Limited Partnersh Acceptable Limited Liability Limited Partnership suffixes:			
B. If amending mailing address and/or principrincipal office address here:	pal office address, <u>er</u>	21	and/or
New Principal Office Address: (Must be STREET address)		SEP 29 AM	
New Mailing Address: (May be post office box)		19:21	D
C. If amending the registered agent and/or register registered agent and/or the new registered office ad		ır records, <u>enter the name o</u>	of the new
Name of New Registered Agent:			
New Registered Office Address:	Enter Florido	ı street address	
	City	Florida Zip Code	

New Registered Agent's Signature, if changing Registered Agent:

		If Changing Registered Age	nt, Signature of New Register
mending or remove	the general partner(s), <u>er</u> ed from our records:	nter the name and business addre	ess of each general par
<u>itle</u>	<u>Name</u>	Address	Type of Action
			Remove
			Add Remove
			☐ Add☐ Remove
			□ Add □ Remove
			☐ Add☐ Remove

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

This Limited Partnership hereby removes its "Limited Liability Limited Partnership" status.

• •	nation, enter change(s) here: (Attach additional sheets, if a	·
AMENDED AS FOLLOWS:		
"7, THE TERM OF THE PARTNERSHIP	SHALL BE PERPETUAL UNLESS SOONER TERMINATE	D
OR DISSOLVED BY OPERATION OF LA	4w or as otherwise provided pursuant	
TO THIS CERTIFICATE."		
State.)	than 90 days after the date this document is filed by the Florida not meet the applicable statutory filing requirements, this date v	
	r is required to sign this document unless the limited partnership rship" election statement. Chapter 620, F.S., requires all general	
GATOR RUE PARTNERS, LTD GATOR RUE LNAGSTORS, INC. GENERAL	PARTNER	
JAMES A SOLDSMITH, PRESIDENT		
Signature(s) of all new or dissociat	ting general partner(s), if any:	
		
Ç,	\$52.50 \$52.50 \$8.75	