A9900000890

(Requestor's Name)	
(Address)	
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(City/State/Zip/Phone #)
PICK-UP WAIT	MAIL
(Business Entity Name)	_
(Document Number)	
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2014 JUN 13 AM 9:

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ACCOUNT NO. : 12000000195
REFERENCE : 175704 4338256
AUTHORIZATION Siell Clevan
COST LIMIT \$ 105.00
ORDER DATE : June 12, 2014
ORDER TIME : 8:58 AM
ORDER NO. : 175704-020
CUSTOMER NO: 4338256
DOMESTIC AMENDMENT FILING
NAME: JABIL CIRCUIT OF TEXAS, LP
EFFECTIVE DATE:
XX ARTICLES OF AMENDMENT RESTATED ARTICLES OF INCORPORATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
XX CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

EXAMINER'S INITIALS:

CONTACT PERSON: Emily Gray -- EXT# 62925

COVER LETTER

TO: Registration Section	
Division of Corporations	
	Circuit of Texas, LP
Name of Florida Limited Par	tnership or Limited Liability Limited Partnership
The enclosed Certificate of Amendment as	nd fee(s) are submitted for filing.
Please return all correspondence concerning	ng this matter to:
Matt Flaherty	
Contact Person	
Kirkland & Ellis, LLP	
Firm/Company	
661 Lexington Ave	
Address .	
New York, NY 10022	
City, State and Zip Code	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
mflahert@kirkland.con	n
E-mail address: (to be used for future annual	
For further information concerning this ma	atter, please call:
	at ()
Name of Contact Person	Area Code and Daytime Telephone Number
Enclosed is a check for the following amo	unt:
\$52.50 Filing Fee \$61.25 Filing Fee and Certificate of Status	\$105.00 Filing Fee and Certified Copy Certified Copy, and Certificate of Status
STREET ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P. O. Box 6327
2661 Executive Center Circle	Tallahassee, FL 32314
Tallahassee, FL 32301	

FILED

2014 JUN 13 AM 9: 38

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

SECRETARY	ÙΕ	S	ĪΔ	Ĭ : .
TALLAHASSE	Έ,	FL	OR	IDA

	0.	
Jabil Circ	cuit of Texas	, LP
Insert name currently on		
Pursuant to the provisions of section 620.1202, limited liability limited partnership, whose certi June 2, 1999, assigned Fadopts the following certificate of amendment to	ficate was filed lorida documen	with the Florida Department of State on t number A9900000890,
This amendment is submitted to amend the following	:	
A. If amending name, <u>enter the new name of the here</u> :	limited partner	ship or limited liability limited partnership
iQor o	of Texas, LP	
New name must be distingui	shable and contain	an acceptable suffix.
Acceptable Limited Partnership suffixes: Limited Partner Acceptable Limited Liability Limited Partnership suffixes	rship, Limited, L.P. :: Limited Liability	, LP, or Ltd. Limited Partnership, L.L.L.P. or LLLP.
B. If amending mailing address and/or principal office address here:	cipal office add	ress, enter new mailing address and/or
New Principal Office Address: (Must be STREET address)		
New Mailing Address: (May be post office box)		
C. If amending the registered agent and/or regisnew registered agent and/or the new registered of		
Name of New Registered Agent:		
New Registered Office Address:	Entar	Florida street address
	Biller	
····	City	, Florida Zip Code
	$\cup uv$	ZID COAE

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.

tle	d from our records: Name	<u>Address</u>	Type of Action
			_
	**************************************		Remove
			
····	44		
			

Page 2 of 3

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

F. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

\$52.50

\$52.50

Filing Fee:

Certified Copy (optional):

Certificate of Status (optional): \$8.75