Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Division of Corporations

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From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number: I2000000146 : (305)444-4994 Phone

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Email Address:

LP/LLLP AMENDMENT/RESTATEMENT/CORRECTION H. MOONEY INVESTMENTS, LTD.

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Help

1.

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

		O.				
H, MOON	EY IN	VEST	MENTS, L	TD.		
Insert name curren	atly on fi	le with F	lorida Departmer	nt of State		
Pursuant to the provisions of section 620 limited liability limited partnership, whose						
DEC 15, 1999, assig						
adopts the following certificate of amenda	nent to	its certi	ificate of limit	ed partnersh	up.	, marij
This amendment is submitted to amend the fol	_				16 JU	SECRE
A. If amending name, enter the new name	of the l	imited r	oartnership or	<u>limited liabi</u>	ility limited ⁱ par	tnership-
here:						12.55 12.55 12.55 13.55
New name must be d	ístinguisl	hable and	contain an accep	table suffix.	P) 12:	50
Acceptable Limited Partnership suffixes: Limited Acceptable Limited Liability Limited Partnership .	Partnersi suffixes:	hip, Limi Limited 1	ted, L.P., LP, or I Liability Limited .	Lid. Parmership, I	<u></u>	
B. If amending mailing address and/or principal office address here:	princi	pal offi	ce address, <u>e</u>	nter new m	ailing address	and/or
New Principal Office Addre	ess:	3825	NW 125 ST	REET		
(Must be STREET address)		OPAL	OCKA, FL	33154		
New Mailing Address:		3825	NW 125 ST			
(May be post office bax)			OCKA FL			
			 -			
C. If amending the registered agent and/onew registered agent and/or the new register	r regist red offic	ered off ce addre	ice address on ess here:	our records	s, <u>enter the nan</u>	ne of the
Name of New Registered Agent:	ADA	MOON	IEY			
New Registered Office Address:	3825	NW 12	25 STREET			
		j.*	Enter Florida	street addre.	ss	
		OPA	LOCKA	, Florida _	33154	
	-	Cin	· 		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.

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>	Name	<u>Address</u>	Type of Action
<u>GP</u>	CHANGE OF ADDRESS	3825 NW 125 STREET OPALOCKA, FL 33154	Add Remove
			Add Jackson Alland
			- Add P FIG
			Add to Som
Marine State of the State of th			Add Remove
			AddRemove
limited partn	uited partnership or limited liabilit nershlp" status, enter change here:		
This Li	imited Partnership hereby elects to be	e a "Limited Liability Limited I	?artnership."
This Li	imited Partnership hereby removes it	s "Limited Liability Limited Pa	artnership" status.
NOTE: If add	ling or removing" limited liability limited p	partnership" status, all general part.	ners must sign this amendment.)

	-,, -,				•
		,			
ffective date, if other than the da	ate of filing:	1 1 1 1	01 11	al - 757 - 43 - 75	
ffective date cannot be prior to nor mate.)	ore than 90 days after	ine date this ac	ocument is Jusa by	the Florida Departm	ent o,
gnature(s) of a general partne	er or all general p	artners*:			
NOTE: Only one current general par	ther is required to sign	this document	unless the limited	partnership is adding	g OT
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