

**B03000000158**

Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : CORPORATION SERVICE COMPANY  
Account Number : I20000000195  
Phone : (850) 521-0821  
Fax Number : (850) 558-1515

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TALLAHASSEE, FLORIDA

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**LP/LLP AMENDMENT/RESTATEMENT/CORRECTION  
DUPONT HOLLYWOOD LIMITED PARTNERSHIP**

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$52.50

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12 JUL 11 AM 8:05

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

AMENDMENT TO CERTIFICATE OF AUTHORITY  
FOR  
FOREIGN LIMITED PARTNERSHIP OR  
LIMITED LIABILITY LIMITED PARTNERSHIP

1. The name of the limited partnership or limited liability limited partnership as it appears on the records of the Florida Department of State is:

DuPont Hollywood Limited Partnership

2. The jurisdiction of its formation is: Massachusetts

3. The date the entity was authorized to transact business in Florida is: 7/25/02

4. If the amendment changes the name of the limited partnership or limited liability limited partnership, enter the new name:

NA

*Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.*

*Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.*

5. If the amendment changes the general partner(s), list the name and business address of each general partner:

Name:

Business Address:

D2:FLA Realty, LLC

1 Church Street Webster, MA 01570

MO8-2594

6. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:  
NA

7. If the amendment corrects any false statement listed in the application, indicate the statement being corrected and the correction:  
NA

8. If the amendment is to add or delete an election to be a limited liability limited partnership statement, check the appropriate box: NA

☐

The entity elects to be a limited liability limited partnership.

☐

The entity is no longer a limited liability limited partnership.

9. Attached is an original certificate, no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

10. Effective date, if other than the date of filing: \_\_\_\_\_

(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

Signature of general partner



Typed or printed name:

William N. DuPont, Manager D2 FLA Realty LLC

Filing Fee: \$52.50

Certified Copy (optional): \$52.50

Certificate of Status (optional): \$8.75

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TALLAHASSEE, FLORIDA



William Francis Galvin  
Secretary of the  
Commonwealth

*The Commonwealth of Massachusetts*  
*Secretary of the Commonwealth*  
*State House, Boston, Massachusetts 02133*

June 6, 2012

TO WHOM IT MAY CONCERN:

I hereby certify that a certificate of organization of a Limited Liability Company was filed in this office by

**D2 FLA REALTY, LLC**

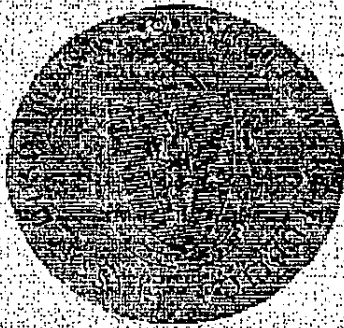
in accordance with the provisions of Massachusetts General Laws Chapter 156C on January 29, 2008.

I further certify that said Limited Liability Company has filed all annual reports due and paid all fees with respect to such reports; that said Limited Liability Company has not filed a certificate of cancellation or withdrawal; and that said Limited Liability Company is in good standing with this office.

I also certify that the names of all managers listed in the most recent filing are:  
**WILLIAM N. DUPONT, RICHARD E. DUPONT, DEBRA DUPONT SCHMIDT**

I further certify, the names of all persons authorized to execute documents filed with this office and listed in the most recent filing are: **WILLIAM N. DUPONT, RICHARD E. DUPONT, DEBRA DUPONT SCHMIDT**

The names of all persons authorized to act with respect to real property listed in the most recent filing are: **WILLIAM N. DUPONT, RICHARD E. DUPONT, DEBRA DUPONT SCHMIDT**



In testimony of which,

I have hereunto affixed the

Great Seal of the Commonwealth

on the date first above written.

*William Francis Galvin*

Secretary of the Commonwealth

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