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RECEIVED
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LP/LLP AMENDMENT/RESTATEMENT/CORRECTION

HCM THIRD HEGEMONY FUND, L.P.

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
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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:

HCM THIRD HEGEMONY FUND, L.P.

2. The jurisdiction of its formation is: Delaware

3. The date the entity was authorized to transact business in Florida is: December 8, 2005.

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

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:

Third Hegemony Partners, LLC

One Park Place, 621 NW 53rd Street, Suite 620
Boca Raton, Florida 33487

MO6000003049

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

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

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

☐ 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 olds, 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 a general partner:

Michael E. Lewitt

Typed or printed name:

Third Hegemony Partners, LLC By: Michael E. Lewitt

| | |
|-----------------------------------|---------|
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Delaware

PAGE 1

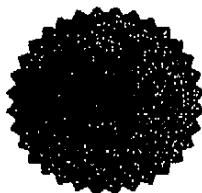
The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "HCM THIRD HEGEMONY FUND, L.P.", FILED IN THIS OFFICE ON THE FIFTH DAY OF JUNE, A.D. 2006, AT 2:10 O'CLOCK P.M.

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Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State
AUTHENTICATION: 4814594

DATE: 06-09-06

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State of Delaware
Secretary of State
Division of Corporations
Delivered 02:10 PM 06/05/2006
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CERTIFICATE OF AMENDMENT
OF
CERTIFICATE OF LIMITED PARTNERSHIP
OF
HCM THIRD HEGEMONY FUND, L.P.

(Under Section 202 of Delaware Revised Uniform Limited Partnership Act)

It is hereby certified that:

FIRST: The name of the limited partnership is HCM Third Hegemony Fund, L.P. (the "Partnership").

SECOND: Pursuant to the provisions of Section 17-202 of the Delaware Revised Uniform Limited Partnership Act ("the Act"), the Certificate of Limited Partnership (the "Certificate") of the Partnership is hereby amended to reflect the following change:

A. Article Third: of the Certificate is hereby amended to reflect a change of the General Partner of the Partnership. Article Third: of the Certificate is hereby amended and restated in its entirety to read as follows:

"Third: The name and address of the General Partner is:

NAME

ADDRESS

Third Hegemony Partners, LLC

One Park Place
621 NW 53rd Street, Suite 620
Boca Raton, Florida 333487"

IN WITNESS WHEREOF, the undersigned has executed this Amendment of the Certificate of Limited Partnership of the Partnership this 5th day of June 2006, to be effective upon filing.

HCM THIRD HEGEMONY FUND, L.P.

By: Third Hegemony Partners, LLC
General Partner

By: /s/ Michael E. Lewitt
Michael E. Lewitt
Managing Member, Authorized Person

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