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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : KATZ BASKIES LLC Account Number: 120080000071

Phone : (561)910-5700

Fax Number : (561)910-5701

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

Email Address: Cara. treed man

LP/LLLP AMENDMENT/RESTATEMENT/CORRECTION J. MILTON FAMILY PARTNERS, LLLP

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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: J. MILTON FAMILY PARTNERS, LLLP Name of Foreign Limited Partnership or Limited Liability Limited Partnership		
Hame of Poroign Limited Pathiesally of Littlied Datointy Limited Pathiesally		
The enclosed amendment and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to:		
Cara Freedman Contact Porson		
Katz Baskies LLC		
2255 Glades Road Suite 240W Address		
Boca Raton, FL 33433		
City, State and Zip Code		
dun with a us (All wallton, a page		
dramberg@J-milton.com E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Cara Freedman at (561) 910-5700 Name of Contact Person Area Code and Daytime Telephone Number		
Name of Contact Person Area Code and Daytime Telephone Number		
Enclosed is a check for the following amount:		
\$52.50 Filing Fee S61.25 Filing Fee and Certified Copy and Certified Copy, and Certified Copy Status		
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 MAILING ADDRESS: Registration Section Division of Corporations Division of Corporations P. O. Box 6327 Tallahassee, FL 32314		

FILED, 003

2014 MAR 19H1Albo80263533

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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

The name of the limited partnership or limited liability limited partnership as it appears on the records of the Florida Department of State is: J. Milton Family Partners, LLLP		
2. The jurisdiction of its formation is:	Delaware	
3. The date the entity was authorized to tr	ansact business in Florida is:11/07/2006	
4. If the amendment changes the name of limited partnership, enter the new name:	the limited partnership or limited liability	
Acceptable Limited Partnership suffices: Limited Acceptable Limited Liability Limited Partnership s or LLLP.	Parmership, Limited, L.P., LP, or Ltd. ngfixes: Limited Liability Limited Parmership, L.L.L.P.	
5. If the amendment changes the general peach general partner: Name:	partner(s), list the name and business address of Business Address:	
Cecil Milton	3211 Ponce De Leon Blvd. Suite 301 Coral Gables, FL 33134	
Frank Milton	3211 Ponce De Leon Blvd. Suite 301 Coral Gables, FL 33134	
Joseph Milton	3211 Ponce De Leon Blvd. Suite 301 Coral Gable, FL 33134	

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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:	4
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 Flor Department of State.)	ida
Signature of a general purcher:	MIN INS
Typed or printed name:	新 10
<u>Cecil milton</u>	SEE E
Filing Fee: \$52.50 Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75	N 9: 23 STATE FLORIDA

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