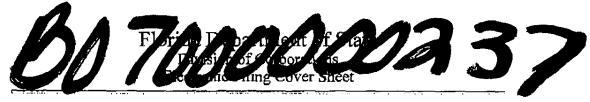
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Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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TQ:

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From:

; C T CORPORATION SYSTEM Account Name

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

LP/LLLP AMENDMENT/RESTATEMENT/CORRECTION THE PRINCIPALS FUND LIMITED PARTNERSHIP

Certificate of Status	0
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D. BRUCE

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3/20/2012

COVER LETTER

	on Section of Corporations					
	_	cipals Fund Limited Part	mership			
SUBJECT:	Name of Foreign Limited P	artnership or Limited Li	ability Limited Partnership			
The enclosed ame	endment and fee(s) are s	ubmitted for filing.				
Please return all c	orrespondence concerni	ng this matter to:				
	Contact Person					
, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	c/o III Associates					
	Firm/Company					
	777 Yamato Road, Suite 300 Address			Z.	<u></u>	
	Boca Raton, Florida 33431			PAC ATC	W S	****
	City, State and Zip Code			AAR ASS	₹20	ī
	scott.wyler@avmltd.com				垩	П
	(to be used for future annual	•	Ì	97	4	C
For further mioris	ation concerning this m			D.F.	ক্	
Name of (Contact Person	at () _ Area Code and D	aytime Telephone Number			
Enclosed is a chec	k for the following amo	unt:				
\$52.50 Filing Fee	\$61.25 Fiting Fee and Certificate of Status	\$105.00 Filing Fo and Certified Copy	\$113.75 Filing Fee Certified Copy, and Certificate of Status	,		
STREET ADDRE			G ADDRESS: on Section			
Division of Corpo			of Corporations			
Clifton Building		P. O. Box	6327			
2661 Executive Co Tallahassee, FL 3		Tallahasse	ee, FL 32314			

FL050 - 05/06/2009 C T System Online

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

appears on the records of the Florida De	Fund Limited Partnership	_	
2. The jurisdiction of its formation is:	Nevada	_	
3. The date the entity was authorized to	transact business in Florida is: 07/26	<u>5/0</u> 7	
4. If the amendment changes the name o limited partnership, enter the new name:	f the limited partnership or limited liability	منسم ددد	
or LLLP.	suffixes: Limited Liability Limited Partnership, L.L. 50	20 20	
If the amendment changes the general each general partner:	partner(s), list the name and business address	-(-1 2	
Name:	Business Address:	STATE	
III Associates	777 Yamato Road, Suite 300	 	
	GP060000179°	7	
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		_	
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		_	
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	• •		

Page 1 of 2

EFFECTIVE DATE 04/01/12

6. If the amendment changes the jurisdiction of organization, indicate new ju	risdiction:	
7. If the amendment corrects any false statement listed in the application, ind statement being corrected and the correction:	licate the	
· · · · · · · · · · · · · · · · · · ·		
8. If the amendment is to add or delete an election to be a limited liability lin partnership statement, check the appropriate box:	nited	
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 taforementioned amendment(s), duly authenticated by the official having custo records in the jurisdiction under the law of which this entity is organized.		
10. Effective date, if other than the date of filing: April 1, 2012 (Effective date cannot be prior to nor more than 90 days after the date this document is filed Department of State.)	by the Florida	
Signature of a general partner:		
Typed or printed name: Scott L. Wyler, Secretary of Wallner Co., Inc., a general partner of Ill Associates, the general partner of The Principals Fund Limited Partnership	12 KAR SEORGI TALLAHI	-1 1
Filing Fee: \$52.50	R 20	
Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75	<u>r</u> gi-≺	1 1
Certificate of Status (optional): 56.75	20年 至	
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