

B 130 00000245

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

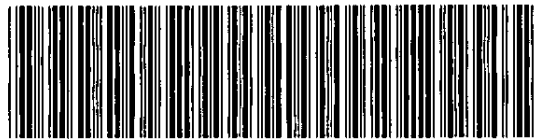
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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RECEIVED  
15 NOV - 5 PM 4:23

TO: SECRETARY OF  
STATE  
TALLAHASSEE, FLORIDA

FILED

15 NOV - 5 AM 8:42

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

NOV - 6 2015

J SHIVERS

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 862209 4328334

AUTHORIZATION :

COST LIMIT : \$ 52.50



ORDER DATE : November 5, 2015

ORDER TIME : 2:48 PM

ORDER NO. : 862209-005

CUSTOMER NO: 4328334

FOREIGN FILINGS

NAME: WAKAYA PERFECTION LP

☐ CORPORATE  
☒ LIMITED PARTNERSHIP  
☐ LIMITED LIABILITY COMPANY

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY  
☒ PLAIN STAMPED COPY  
☐ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER: \_\_\_\_\_

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** WAKAYA PERFECTION LP

Name of Foreign Limited Partnership or Limited Liability Limited Partnership

The enclosed amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

APRIL L. AMADOR

Contact Person

PROCOPIO

Firm/Company

525 B STREET, SUITE 2200

Address

SAN DIEGO, CA 92101

City, State and Zip Code

APRIL.AMADOR@PROCOPIO.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

APRIL L. AMADOR at (619) 906-5617

Name of Contact Person

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$52.50 Filing Fee

☐ \$61.25 Filing Fee  
and Certificate of  
Status

☐ \$105.00 Filing Fee  
and Certified Copy

☐ \$113.75 Filing Fee,  
Certified Copy, and  
Certificate of Status

**STREET ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

**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:

WAKAYA PERFECTION LP

2. Document Number of Foreign Limited Partnership or Limited Liability Limited Partnership: B13000000245

3. The jurisdiction of its formation is: DELAWARE

4. The date the entity was authorized to transact business in Florida is: AUGUST 26, 2013

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

THE WAKAYA GROUP LP

*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.*

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

Name:

Business Address:

\_\_\_\_\_

\_\_\_\_\_

☐ Add

☐ Remove

☐ Change

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FLORIDA

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:

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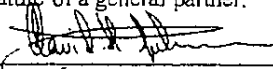
8. If the amendment is to add or delete an election to be a limited liability limited partnership statement, check the appropriate box:

- ☐ 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:

  
\_\_\_\_\_

Typed or printed name:

David Gilmour, Manager of Newgil Investments, L.L.C.

Filing Fee: \$52.50  
Certified Copy (optional): \$52.50  
Certificate of Status (optional): \$8.75

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15 NOV - 5 AM 8:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "WAKAYA PERFECTION LP", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "THE WAKAYA GROUP LP" ON THE SECOND DAY OF NOVEMBER, A.D. 2015, AT 1:47 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID LIMITED PARTNERSHIP IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT HAVING BEEN CANCELLED OR REVOKED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

FILED  
15 NOV -5 AM 8:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



  
Jeffrey W. Bullock, Secretary of State

4992995 8320  
SR# 20150796700

Authentication: 10370867  
Date: 11-05-15

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)