# 15/400000/17

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
· · · · ·
(Document Number)
Certified Copies Certificates of Status
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#### **COVER LETTER**

TO: Registration Division of C							
	Timberland	ls. LLLP					
<del></del>	lame of Foreign Limited P		i Liability Li	mited Partne	ership	_	
The enclosed amend	ment and fee(s) are sui	bmitted for filing					
Please return all corr	espondence concernin	g this matter to:					
Travis Griff	ith					esd Get	
	Contact Person		-			<u>}:2</u> ===	
c/o Atkinso	n Ferguson,	LLC			· ;		
· · ·	Firm/Company		•		20.57	ণ ক	, :
118 Court S	Street				SEE, T	PH 1: 21	, , ,
Monroe, Geo	Address Orgia 30655				ATE.	26	
(	City, State and Zip Code	•	•			-	
tgriffith@ar	guseyed.cor	n					
	be used for future annual r						
For further informati	on concerning this ma	itter, please call:					
Laura Powe		<sub>at (</sub> 770	, 267-3	3000			
Name of Cor	tact Person	Area Code	Daytime	Telephone	Number	<del>_</del>	
Enclosed is a check t	for the following amou	ınt:					
\$52.50 Filing Fee	\$61.25 Filing Fee and Certificate of Status	\$105.00 Filin and Certified Cop	y Cert	113.75 Filir tified Copy, tificate of St	and		
Mailing Add Registration S Division of C P.O. Box 632 Tallahassee, I	Section orporations 7		Street Add Registratio Division of The Centre 2415 N. M Tallahassed	n Section f Corporat of Tallah onroe Stre	assee æt, Suite	e 810	

# AMENDMENT TO CERTIFICATE OF AUTHORITY FOR

# FOREIGN LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP

The name of the limited partnership or lim the Florida Department of State is: GFP Timberlands, LLLP	ited liability limited partnership as it appears	on the records of
2. Document Number of Foreign Limited Par B17000000117	tnership or Limited Liability Limited Partners	hip: _
2. The jurisdiction of its formation is: Georgia		
3. The date the entity was authorized to trans	act business in Florida is: 5/11/2017	_ 3
4. If the amendment changes the name of the the new name:	limited partnership or limited liability limited	ا partnership, enter
Acceptable Limited Partnership suffixes: Limited Pa Acceptable Limited Liability Limited Partnership suff		oruge PA
(If name unavailable in Florida, enter alternat Florida.)	e name adopted for the purpose of transacting	business in 26
5. If the amendment changes the general part Name:	ner(s), list the name and business address of e Business Address:	ach general partner
GFP Peace, LLC	401 Cherry Street, Ste 701	■Add
	Macon, Georgia 31201	Remove Change
Griffith GP, LLC	401 Cherry Street, Ste 701	∏Add
	Macon, Georgia 31201	Remove Change
		Add □Remove □Change
		Add Remove Change
		Add Remove Change
		AddRemoveChange

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 corrected and the correction:	l being
8. If the amendment is to add or delete an election to be a limited liability limited partnership st the appropriate box:	latement, check
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 which this entity is organized.	
10. Effective date, if other than the date of filing:	
Signature of a general partner	
Typed or printed name:  Travis Griffith	M.S
Filing Fee: \$52.50 Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75	316 PH 1:26

Control Number: 0003909

## STATE OF GEORGIA

### Secretary of State

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

#### CERTIFICATE OF EXISTENCE

I, Brad Raffensperger, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

#### GFP TIMBERLANDS, LLLP

a Domestic Limited Liability Limited Partnership

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Form Number 211



Brad Raffonspager

Brad Raffensperger Secretary of State