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| (Requestor's Name) | | | | |
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| PICK-UP WAIT MAIL | | | | |
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| (Business Entity Name) | | | | |
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| (Document Number) | | | | |
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| Certified Copies Certificates of Status | | | | |
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| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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CORPORATION SERVICE COMPANY 1201 Hays Street

1201 Hays Street
Tallhassee, FL 32301
Phone: 850-558-1500

| ACCOUNT NO. : 12000000195 | | | | |
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| REFERENCE : 310019 4804708 | | | | |
| AUTHORIZATION: Spulleleman | | | | |
| COST LIMIT : \$ 52.50 | | | | |
| ORDER DATE : July 18, 2018 | | | | |
| ORDER TIME : 2:05 PM | | | | |
| ORDER NO. : 310019-020 | | | | |
| CUSTOMER NO: 4804708 | | | | |
| *************************************** | | | | |
| FOREIGN FILINGS | | | | |
| NAME: SOUTHOCEAN PRIVATE EQUITY PARTNERS II LP | | | | |
| CORPORATE XX LIMITED PARTNERSHIP LIMITED LIABILITY COMPANY | | | | |
| XXXX AMENDMENT | | | | |
| PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: | | | | |
| CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING | | | | |

EXAMINER:

CONTACT PERSON: Roxanne Turner -- EXT# 62969

COVER LETTER

| | ation Section n of Corporations | | | | |
|--|---|---|--|--|--|
| SUBJECT: Name of Foreign Limited Partnership or Limited Liability Limited Partnership | | | | | |
| The enclosed ar | mendment and fee(s) are su | | | | |
| Please return al | l correspondence concernir | ng this matter to: | | | |
| Yvette Yu | un | | | | |
| | Contact Person | | | | |
| Seward 8 | & Kissel LLP | | | | |
| | Firm/Company | | | | |
| One Battery Park Plaza, 24th Floor | | | | | |
| | Address | | | | |
| New York | , NY 10003 | | | | |
| | City, State and Zip Code | | | | |
| | rldent.com | | | | |
| E-mail addre | ss: (to be used for future annual | report notification) | | | |
| For further info | rmation concerning this ma | atter, please call: | | | |
| Yvette Yu | n | _{at (} 212 ₎ 57 | 4-1411 | | |
| Name | of Contact Person | Area Code and Daytin | ne Telephone Number | | |
| Enclosed is a check for the following amount: | | | | | |
| \$52.50 Filing I | Fee S61.25 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: | | MAILING A | | | |
| Registration Section | | Registration Section Division of Corporations | | | |
| Division of Corporations Clifton Building | | P. O. Box 6327 | | | |
| 2661 Executive Center Circle | | Tallahassee, I | | | |
| Tallahassee, FL | 32301 | | | | |

: 4

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

| The name of the limited partnership or limit the Florida Department of State is: SouthOcean Private Equity Partners II LP | ted liability limited partnership as it appe | ars on the records of |
|---|---|-------------------------------|
| 2. Document Number of Foreign Limited Parts | nership or Limited Liability Limited Partr | nership: <u>B180000000061</u> |
| 2. The jurisdiction of its formation is: Delaware | | |
| 3. The date the entity was authorized to transa | ct business in Florida is: 3/6/2018 | |
| 4. If the amendment changes the name of the the new name: Las Olas Private Equity VII, LP | imited partnership or limited liability lim | ited partnership, enter |
| Acceptable Limited Partnership suffixes: Limi Acceptable Limited Liability Limited Partnersi LLLP. | | |
| 5. If the amendment changes the general partn Name: | er(s), list the name and business address Business Address: | of each general partner: |
| Fourth Generation Manager LLC | 401 E. Las Olas Boulevard, Suite 2200 | ✓Add |
| | Fort Lauderdale, Florida 33301 | Remove Change |
| SouthOcean Investment Partners GP, LLC | 401 E. Las Olas Boulevard, Suite 2220 | Add |
| | Fort Lauderdale, Florida 33301 | Remove Charge |
| | | T-Alld & T |
| | | Remove |
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| | | Enange |
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| | | ☐Remove ☐Change |
| | | Add |
| | | ☐Remove ☐Change |

| 6. If the amendment changes the ju | risdiction of organization, indic | ate new jurisdiction: |
|---|--|---|
| 7. If the amendment corrects any facorrected and the correction: | lse statement listed in the appli | cation, indicate the statement being |
| | | |
| | | |
| 8. If the amendment is to add or det the appropriate box: | ete an election to be a limited l | iability limited partnership statement, check |
| The entity elects to | be a limited liability limited pa | artnership. |
| The entity is no lor | nger a limited liability limited p | artnership. |
| 9. Attached is an original certificate amendment(s), duly authenticated b which this entity is organized. | e, no more than 90 days olds, ev y the official having custody of | ridencing the aforementioned records in the jurisdiction under the law of |
| 10. Effective date, if other than the (Effective date cannot be prior to no Department of State.) | date of filing: or more than 90 days after the a | late this document is filed by the Florida |
| Signature of a peperal partner: | | ∓:2 ≅ |
| Typed or printed name: | | |
| Robert J. Puck | | 17.88 17.88 17.88 |
| Filing Fee: Certified Copy (optional): Certificate of Status (optional): S | \$52.50 \$52.50 | PEE FLORI |
| Certificate of Status (optional). 3 | | <u>ම</u> ු |



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY THAT THE SAID "SOUTHOCEAN PRIVATE

EQUITY PARTNERS II, LP", FILED A CERTIFICATE OF AMENDMENT,

CHANGING ITS NAME TO "LAS OLAS PRIVATE EQUITY VII, LP" ON THE

EIGHTEENTH DAY OF JULY, A.D. 2018, AT 3:02 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.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "LAS OLAS PRIVATE EQUITY VII, LP" WAS FORMED ON THE FIFTH DAY OF MARCH, A.D. 2018.



Authentication: 203115711

Date: 07-24-18

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