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Division of Corporations

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA**Electronic Filing Cover Sheet**

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Division of Corporations

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From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : 120000000195

Phone : (850)521-1000

Fax Number : (850)558-1575

LP/LLP AMENDMENT/RESTATEMENT/CORRECTION**ANNA MARIA ASSOCIATES, LIMITED PARTNERSHIP**

Certificate of Status	1
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**AMENDMENT TO CERTIFICATE OF AUTHORITY
FOR
FOREIGN LIMITED PARTNERSHIP OR
LIMITED LIABILITY LIMITED PARTNERSHIP**

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

Anna Maria Associates, Limited Partnership

2. The jurisdiction of its formation is: State of New York

3. The date the entity was authorized to transact business in Florida is: _____

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

Anna Maria Associates, L.P.

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 L.L.P.

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

Name:

Business Address:

N/A

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**State of New York
Department of State } ss:**

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I hereby certify, that a Certificate of Amendment of ANNA MARIA, L.P.
changing its name to ANNA MARIA ASSOCIATES, L.P. was filed with this office
on 11/15/1993.

*WITNESS my hand and the official seal
of the Department of State at the City of
Albany, this 13th day of July two
thousand and six.*



Special Deputy Secretary of State

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