

B980000000091

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

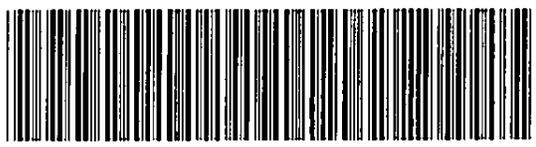
(Document Number)

Certified Copies _____ Certificates of Status _____

Special instructions to Filing Officer:

J. HORNE
DEC - 4 2023

Office Use Only



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RECEIVED
2025 DEC - 3 PM 3:55
MICHIGAN DEPARTMENT OF STATE
FALL ARIZONA, AZ (900)



 CSC - Tallahassee
1201 Hays Street
Tallahassee, FL 32301-2607
850-558-1500, Ext: x61563

To: Department Of State, Division Of Corporations
From: Shauna Godbolt
Ext: x61563
Date: 12/03/25
Order #: 4874059-3
Re: SPECIAL ACCOUNT-U, L.P.
Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:
Supporting Documents
Amount to be deducted from our State Account: \$35.0 - FL State Account Number:
I20000000195

Please take the following action:
File in your office on basis
Issue Proof of Filing



Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.



COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SPECIAL ACCOUNT - U, L.P.
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:

Contact Person

Firm/Company

Address

City, State and Zip Code

subsidiaryregulatoryreportingteam@tiaa.org
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

_____ at (_____) _____
Name of Contact Person Area Code 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

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

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



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:



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: _____ (optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Signature of a general partner:

Wendy Henderson

Typed or printed name:

Wendy Henderson

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

AMEND-647585

Delaware

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The First State

I, CHARUNI PATIBANDA-SANCHEZ, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "SPECIAL ACCOUNT-U, L.P.", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "SPECIAL ACCOUNT-NA, L.P." ON THE TWENTY-FIFTH DAY OF MARCH, A.D. 2024, AT 11:45 O`CLOCK A.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 "SPECIAL ACCOUNT-NA, L.P." WAS FORMED ON THE FOURTH DAY OF APRIL, A.D. 1996.



C. P. Sanchez

Charuni Patibanda-Sanchez, Secretary of State

2574475 8320
SR# 20254742405

Authentication: 205488807
Date: 12-03-25

You may verify this certificate online at corp.delaware.gov/authver.shtml