

9/3/20

Division of Corporations

240 PM

M1900002670

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H20000306817 3)))



H200003068173ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : GREENBERG TRAURIG (ORLANDO)
Account Number : 103731001374
Phone : (407)418-2435
Fax Number : (407)429-5999

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

2020 SEP - 3 A 8:33

FILED

2020 SEP - 8 PM 12:00

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
LIONGROVE CAPITAL PARTNERS LLC

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$30.00

9/3

LLC Name Change

Electronic Filing Menu Corporate Filing Menu Help

SEP 10 2020

D CONNELI



September 4, 2020

FLORIDA DEPARTMENT OF STATE
Division of Corporations

LIONGROVE CAPITAL PARTNERS LLC
848 BRICKELL AVE, SUITE 900
MIAMI, FL 33131

Resubmitted

SUBJECT: LIONGROVE CAPITAL PARTNERS LLC
REF: M19000002670

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The new name must be on line 5 *It is listed on line 5. just deleting "capital" from name.*

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (350) 245-6050.

Yasemin Y Sulker
Regulatory Specialist III

FAX Aud. #: H20000306817
Letter Number: 220A00017060

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
((1120000306817 3)) TO CERTIFICATE OF AUTHORITY TO TRANSACT
BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of

State: LionGrove Capital Partners LLC

Enter new principal office address, if applicable: n/a

(Principal office address
MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address
MAY BE A POST OFFICE BOX)

2. The Florida document number of this limited liability company is: M19000002670

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: March 19, 2019

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: _____
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

→ LionGrove Partners LLC

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C.," or "LLC.")

6. If amending the registered agent and/or registered officer address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: n/a

New Registered Office Address: _____
Enter Florida Street Address

_____, Florida _____
City Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

((1120000306817 3)))

If Changing Registered Agent, Signature of New Registered Agent

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

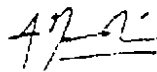
((H20000306817 3)))

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(c), indicate that change:

n/a

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove

9. Attached is a certificate, if required: no more than 90 days old, 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.



Signature of the authorized representative

Andro Nodarse-Leon

Typed or printed name of signee

((H20000306817 3)))

Filing Fee: \$25.00

((H20000306817 3)))

Delaware
The First State

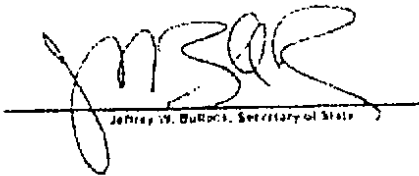
Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT
COPY OF THE CERTIFICATE OF AMENDMENT OF "LIONGROVE CAPITAL
PARTNERS LLC", CHANGING ITS NAME FROM "LIONGROVE CAPITAL
PARTNERS LLC" TO "LIONGROVE PARTNERS LLC", FILED IN THIS OFFICE
ON THE SECOND DAY OF SEPTEMBER, A.D. 2020, AT 2:47 O'CLOCK P.M.

((H20000306817 3)))

6876799 8100
SR# 20207079433




Jeffrey W. Bullock, Secretary of State

Authentication: 203588815
Date: 09-02-20

(((H20000306817 3)))

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF FORMATION
OF
LIONGROVE CAPITAL PARTNERS LLC

LIONGROVE CAPITAL PARTNERS LLC (hereinafter called the "Company").
a limited liability company organized and existing under and by virtue of the Limited
Liability Company Act of the State of Delaware, does hereby certify:

1. The name of the limited liability company is LionGrove Capital Partners
LLC.

2. The Certificate of Formation of the company is hereby amended by
striking out Article 1 thereof and by substituting in lieu of said Article 1 the following
new Article 1:

"1. The name of the limited liability company is **LionGrove Partners LLC** (the
"Company")."

Executed on this 19th day of August, 2020.

By: /s/ Andro Nodarse-León

Andro Nodarse-León

Authorized Person

State of Delaware
Secretary of State

Division of Corporations
Delivered 02:47 PM 09/02/2020
(((H20000306817 3)))

FILED 02:47 PM 09/02/2020

SR 20207079433 - File Number 6876799