Certificate of Amendment to Certificate of Limited Partnership
filed pursuant to §7-90-301, et seq. and §7-62-202 of the Colorado Revised Statutes (C.R.S.)

1. For the entity, its ID number and entity name are
   ID number
   __________________________
   (Colorado Secretary of State ID number)
   Entity name
   ____________________________________________________________

2. The new entity name (if applicable) is
   ____________________________________________________________

3. (If the following statement applies, adopt the statement by marking the box and include an attachment.)
   ☐ This document contains additional amendments or other information.

4. (Caution: Leave blank if the document does not have a delayed effective date. Stating a delayed effective date has significant legal consequences. Read instructions before entering a date.)
   (If the following statement applies, adopt the statement by entering a date and, if applicable, time using the required format.)
   The delayed effective date and, if applicable, time of this document is/are
   ________________________
   (mm/dd/yyyy hour:minute am/pm)

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Causing this document to be delivered to the Secretary of State for filing shall constitute the affirmation or acknowledgment of each individual causing such delivery, under penalties of perjury, that such document is such individual's act and deed, or that such individual in good faith believes such document is the act and deed of the person on whose behalf such individual is causing such document to be delivered for filing, taken in conformity with the requirements of part 3 of article 90 of title 7, C.R.S. and, if applicable, the constituent documents and the organic statutes, and that such individual in good faith believes the facts stated in such document are true and such document complies with the requirements of that Part, the constituent documents, and the organic statutes.

This perjury notice applies to each individual who causes this document to be delivered to the Secretary of State, whether or not such individual is identified in this document as one who has caused it to be delivered.

5. The true name and mailing address of the individual causing the document to be delivered for filing are

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   (Last)                   (First)  (Middle)  (Suffix)
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   (Street name and number or Post Office Box information)
   ____________________________________________________________
   __________________________   __________________
   (City)                       (State)
   ____________________________________________________________
   (Postal/Zip Code)
   __________________________   __________________
   (Province – if applicable)   (Country – if not US)
(If the following statement applies, adopt the statement by marking the box and include an attachment.)

☐ This document contains the true name and mailing address of one or more additional individuals causing the document to be delivered for filing.

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