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STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
148 W. River Street
Providence, Rhode Island 02904-2615

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SECRETARY OF STATE
CORPORATIONS DIV
2009 OCT 27 AM 10:45

LIMITED PARTNERSHIP

CERTIFICATE OF AMENDMENT TO
CERTIFICATE OF LIMITED PARTNERSHIP

The undersigned, desiring to amend the Certificate of Limited Partnership under and by virtue of the power conferred by Section 7-13-9 of the General Laws of Rhode Island, 1956, as amended, hereby execute the following Certificate of Amendment to the Certificate of Limited Partnership:

1. The name of the limited partnership is:

Coron Family Limited Partnership

2. The date of filing of the Certificate of Limited Partnership is December 14, 2001

3. The Certificate of Limited Partnership (as previously amended None)
(List dates of prior amendment(s), if applicable. If none, so state.)

is amended as follows:

[Insert amendment]

Jonathan V. Kalander, as Trustee of the Coron I Trust Agreement dated December 10, 2001 and Jonathan V. Kalander, as Trustee of the Coron II Trust Agreement dated December 10, 2001 shall be removed as General Partners and the following General Partners named in their place:

General Partner	Business Address
1. Fernando F. Ronci, as Trustee of the Coron I Trust Agreement dated December 10, 2001	2324 Saratoga Bay Drive West palm Beach, FL 33409
2. Corinne A. Ronci, as Trustee of the Coron II Trust Agreement dated December 10, 2001	2324 Saratoga Bay Drive West Palm Beach, FL 33409

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4. This Certificate of Amendment is signed by at least one general partner and, if applicable, by each other general partner designated herein as a new general partner.

Under penalty of perjury, I/we declare and affirm that I/we have examined this Certificate of Amendment to the Certificate of Limited Partnership, including any accompanying attachments, and that all statements contained herein are true and correct.

Date: 10/14/08

Coron Family Limited Partnership

Print Name of Limited Partnership

By [Signature]

By [Signature]

By [Signature]

By _____

By _____



State of Rhode Island and Providence Plantations

A. Ralph Mollis

Secretary of State

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

I, A. RALPH MOLLIS, Secretary of State of the State of Rhode Island
and Providence Plantations, hereby certify that this document, duly
executed in accordance with the provisions of Title 7 of the General Laws
of Rhode Island, as amended, has been filed in this office on this day:

A handwritten signature in black ink that reads "A. Ralph Mollis".

A. RALPH MOLLIS

Secretary of State

