

Filing Fee: \$50.00

ID Number: 104129



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
2016 FEB 26 AM 10:51

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:

The Charles S. Wilson Family Limited Partnership for Real Estate

2. The date of filing of the Certificate of Limited Partnership is

12/29/1988

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]

Charles S. Wilson is no longer a general partner of the partnership.

The new general partners are:

1. Dolores E. Wilson Sukhedo

1190 North East 103rd Street

Miami Shores, FL 33138

2. Alicia M. Conte

342 Stanlev Avenue

Mamaroneck, NY 05431

3. Kathryn A. Wilson

33 East End Avenue

New York, NY 10028

FILED

FEB 26 2016

By 268682

A.A. 10:51 A.M.

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: 1/7/2016

Charles S. Wilson Family Limited Partnership

Print Name of Limited Partnership

By Charles S Wilson

By DS

By Kathryn A Wilson

By Jim

By _____



State of Rhode Island and Providence Plantations
Department of State | Office of the Secretary of State
Nellie M. Gorbea, *Secretary of State*

I, NELLIE M. GORBEA, 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 blue ink, appearing to read "Nellie M. Gorbea". The signature is fluid and cursive, written in a professional style.

Nellie M. Gorbea
Secretary of State

