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State of Rhode Island and Pro Department of State		Plantations ness Services Division		2119 OCT 23	GORPORI
Certificate of Amendme				3 AM11: 55	ATIONS
→Filing Fee: \$50.00					
The undersigned, desiring to amen power conferred by RIGL <u>7-13-9,</u> h Certificate of Limited Partnership:	d the Ce ereby ex	ertificate of Limited Partnership under and by virtue of the secutes the following Certificate of Amendment to the	[	55	۲-> ۳۱
1. Entity ID Number:	2. The n	ame of the partnership is:			
001332546	Pac	ifica Victoria Oakland LP			
3. If the entity's name is changing, state the new name:	•				
		Check the box to	indicate	no chan	<u>.ge (~ )</u>
4. The date of filing of the Certifica of Limited Partnership is:	ate May	6, 2015			
5. If the specified office address is changing complete the following section:	5		_		
		Check the box to	o indicate	: no char	ige[/]
6. If the mailing address is changing complete the following section:		Check the box to	indicate	a no char	
7. If there is a change in the case	ral parts	ers complete the following section:			-ye
*List ALL general partners as of this a					
NAME		ADDRESS			
Pacifica SL Oakland Heights Ll	LC	1775 Hancock Street Suite 200, San Diego, CA 92110	, 		
	·			k	
Check the box to indicate an attachment		Check the box to	o indicate	: no char	ige

MAIL TO: Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615 Phone: (401) 222-3040 Website: www.sos.ri.gov

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FORM 301 - Revised: 03/2019

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8. If adding or amending additional provisions, complete the following section:						
Check the box to indicate an attachment Check the Check t	he box to indicate no change 🗹					
9. As required by RIGL 7-13-69, the partnership has paid all fees and taxes.						
10. 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.						
Type or Print Name of Limited Partnership						
Pacifica Victoria Oakland LP						
Signature of General Partner	Date October 16, 2019					
Signature of General Partner	Date					
Signature of General Partner	Date					
Signature of General Partner	Date					
Signature of General Partner	Date					

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If you have any questions, please call us at (401) 222-3040, Monday through Friday, between 8:30 a.m. and 4:30 p.m., or email corporations@sos.ri.gov.



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:

October 23, 2019 11:55 AM

Tulli U. Kole

Nellie M. Gorbea Secretary of State

