Secretary of State Office 500 E Capitol Ave Pierre, SD 57501 (605)773-4845 corpinfo@state.sd.us

## **CERTIFICATE OF AMENDMENT**

## **DOMESTIC LIMITED PARTNERSHIP**

SDCL 48-7-202

FILING FEE: \$125

Make check payable to SECRETARY OF STATE

The Name and Business ID of the Limited Partnership	is:		
Name (Note: This must be the exact name as registered.)		Business ID	_
The amended name of the Limited Partnership:			
Note: The name shall contain without abbreviation the words "limited	partnership".		
The date of filing the Certificate of Limited Partnership:			
Please complete ONLY if there is a change to any of the	ne registered agent info	rmation.	
South Dakota law permits the registered agent <b>to be e</b> individual), <b>B)</b> a commercial registered agent, or <b>C)</b> an <b>(a)</b> The South Dakota Noncommercial Registered Age	office holder. Comple	te only one below, eit	her (a) or (b) or (c
Actual Street Address in this State	City	State	ZIP+4
Mailing Address in this State, if Different from Street Address	City	State	ZIP+4
Email Address (Optional)			
<b>(b)</b> When listing a Commercial Registered Agent, pleas Commercial Registered Agent.	se state their CRA#. Th	nis number can be obta	ined from the
Commercial Registered Agent Name		CRA#	
(c) Title of the office or other position with the business	S:		
Business Office's Actual Street Address in this State	City	State	ZIP+4
Mailing Address in this State, if Different from Street Address	City	State	ZIP+4
Email Address (Optional)			

5. The amendment to the C	ertificate is:		
6. The names and business	addresses of any NEW gener	ral partner(s).	
General Partner	Address	City	State ZIP+4
General Partner	Address	City	State ZIP+4
General Partner	Address	City	State ZIP+4
No person may execute this penalty (SDCL 22-39-36).	report knowing it is false in an	y material respect. Any violation ma	y be subject to a criminal
	cuted by at least <b>one</b> general p	eartner and by each additional genera	al partner designated as a
new general partner (SDCL	48-7-204(2)).		
Dated			
		Signature of an authorized person	
Email (Optional)		Printed Name	
D !			
Dated		Signature of an authorized person	
Email (Optional)		Printed Name	
, ,			
Dated		Signature of an authorized person	
Email		·	
(Optional)		Printed Name	