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EXPEDITED LED Form LP 202 January 2005

Filing Fee: \$50

Submit in duplicate. Payment must be made by certified check, cashier's check, Illinois attorney's check, Illinois C.P.A.'s check or money order, payable to Secretary of State.

Please do not send cash.

Department of Business Services Limited Partnership Division 357 Howlett Building Springfield, IL 62756 217-785-8960 www.cyberdriveillinois.com

Concerndence regarding this filing will be sen to the registered agent of the Limited Partnership unless a selfaddressed, siamped envelope is included.



0605431029 Fee: \$26.00

Eugene "Gene" Moore

Cook County Recorder of Deeds Date: 02/23/2006 10:39 AM Pg: 1 of 2

Illinois Secretary of State **Department of Business Services**

Certificate of Amendment to the Certificate of Limited Partnership (Illinois Limited Partnership or LLLP)

Please type or print clearly.

1.	Limited Partnership Name: Grosvenor Multi-Strategy Leveraged Feeder Fund I, L.P.
2.	File Number assigned by Secretary of State: S014115
	Federal Employer Identification Number (F.E.I.N.): 36-4200+77
4.	The Certificate of Limited Partnership is amended as follows: (Check applicable changes and specify in item 5. For address changes PO. Box alone is unacceptable.) a) Admission of a new General Partner (give name and business cardiess in item 5) b) Withdrawal of a General Partner (give name in item 5)

- Change of Registered Agent and/or Registered Agent's office (give new name and address, including county in item 5)
- a) Change in address of office at which the records required by Section 104 or 121 of the Act are kept (give new address in item 5)
- e) Change in General Partner's name and/or business address (give new name and address in item 5)
- ☐ f) Change in Partner's total aggregate contribution amount (give new dollar amount in tiem 5) a g) Change in Limited Partnership's name (give new name in item 5)
- ☐ h) Change in Date of Dissolution (give new date in item 5)
- ☐ i) Other (give information in item 5)
- 🔾 i) Dissociation of General Partner (only for Limited Partnerships registered in 2005 and later; give name in item 5)
- 5. Item #4 changes (For additional space, continue on next page.):
 - c), d) and e): 900 N. Michigan Avenue, Suite 1100, Chicago, Illinois 60611, Cook County

RECORDING DESK **BOX** 170

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Form LP 202

5. Item #4 changes (cont.)

Names and Business Addresses of General Partners

The undersigned affirms, under penalties of perjury, that the facts stated herein are true. The following signatures are reasoned:

If adding or deleting a statement that this Limited Partnership is a Limited Liability Limited Partnership, all

- at least one General Partner on record,
- all new General Partners,
- all Dissociated and withdrawing General Partners.

City, State, ZIP

General Partners on regard must sian. Signature Paul A. Meister, Member of Grosvenor Holdings, L.L.C., Manager of GCM, L.L.C., Gen rai Partner of Name and Title (type or print) Name and Title (type or print) Grosvenor Capital Management, L.P. General Partner Name if corporation or other entity (must be in good standing) General Partner Name if corporation or other entity (must be in good standing) 900 N. Michigan Avenue, Suite 1100 Street Address Street Address Chicago, Illinois 60611 City, State, ZIP City, State, ZIP Signature Signature Name and Title (type or print) Name and (it) (type or print) General Partner Name if corporation or other entity (must be in good standing) General Partner Name if corporation or other shift (must be in good standing) Street Address Street Address

Signatures must be in black ink on an original document.

Carbon copy, photocopy or rubber stamp signatures

may only be used on conformed copies

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