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Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : SHUTTS & BOWEN, LLP

Account Number: 076447000313 Phone : (305)358-9166

: (305)347-7748 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: RCheng@shuts.com

LP/LLLP AMENDMENT/RESTATEMENT/CORRECTION POSTMASTER ASSOCIATES, LTD.

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CERTIFICATE OF AMENDMENT то CERTIFICATE OF LIMITED PARTNERSHIP ÓF

POSTMASTER ASSOCIATES, LTD.			
Insert name currently of	n file with Florida Depar	trnent of State	
Pursuant to the provisions of section 620.1202, limited liability limited partnership, whose cert 02/14/2005, assigned f adopts the following certificate of amendment	ificate was filed wit Florida document nu	h the Florida Department on her _A05000000337_	nip or of State on
This amendment is submitted to amend the following	g:	, ,	
A. If amending name, enter the new name of the here:	e limited partnership	or limited liability limited	<u>partnership</u>
FOSTMASTER ASSOCIATES, LILLP			
Now name must be distingui	ishabie and contain an ac	coptable suffix.	
Acceptable Limited Partnership suffixes: Limited Partner Acceptable Limited Limbility Limited Partnership suffixes B. If amending mailing address and/or princ principal office address here:	: Limited Liability Limit	ed Partnership, L. L.L.P. or Lla	
New Principal Office Address: (Must be STREL I address)	9100 South Dadelan MIAMI, FL 33156	d Blvd., Suite 700	·
New Mailing Address: (May be post office box)	9100 South Dadeland MIAMI, FL 33156	d Blvd., Suite 700	<u>-</u> -
C. If amending the registered agent and/or registered agent and/or the new registered office a		our records, <u>enter the name</u>	of the new
Name of New Registered Agent:			- :
New Registered Office Address:	F . 171 ·		_
	Enter Florid	la street address	
		, Florida	<u> </u>
	City	Zip Code	<u> بر</u>

12/22/2023 11:22 AM FROM: 3053819982

TO: +18506176383

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New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

If Changing Registered Agent, Signature of New Registered Agent

D. If amending the general partner(s), enter the name and business address of each general partner being added or removed from our records:

<u>Title</u>	<u>Name</u>	Address	Type of Action
GP	PHG POSTMASTER, LLC	9400 S DADELAND BLVD - STE 100 NEAML FL 23156	_
GP	EVER ULADES HOUSING TAUST, INCORPORATED	19308 S.W. 380TH S FREET FLORIDA CITY, FL 33034	_ ■ Add _ □ Remove
			_ □ Add □ Remove
			☐ Add ☐ Remove
			_ □ Add □ Remove

- E. If the limited partnership or limited liability limited partnership is amending its "limited liability limited partnership" status, enter change here:
- This Limited Partnership hereby elects to be a "Limited Liability Limited Partnership."
- [4] This Limited Partnership hereby removes its "Limited Liability Limited Partnership" status.

(NOTE: If adding or removing" limited liability limited partnership" status, all general partners must sign this amendment.)

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F. If amending any other info	ormation, enter ch	ange(s) here: (Attach additional sheets, if necessary.)
Effective date, if other than the da	te of filing:	
(Effective date cannot be prior to nor mo		the date this document is filed by the Florida Department of
State.) Note: If the date inserted in this block do	es not meet the appli	cable statutory filing requirements, this date will not
be listed as the document's effective date	on the Department of	of State's records.
Signature(s) of a general partner	r or all general u	artners*:
removing a "limited liability limited parts	ership" election state	this document unless the limited partnership is adding or ment. Chapter 620, F.S., requires all general partners to sign
when adding or removing a "limited liabi	lity limited partnershi	ip" election statement.)
A. I. A. Few and		
David O Deutch, President of PHG Postin	raster; titC	
201		
Steven C. Kirk, President of Everglades Housing	g Trust, Incorporated	
Signature(s) of all new or dissocia	ating ganaral nar	ther(c) if any
	ming general par	ther(s), if any.
and a hunt pholest		
Cavid O, Deutch, President of PHG Postm	aster, LLC	
Staven N. Kirk, President of Everglades Housing	Trust Incorporated	
	Trust, incorporate	

		•
•	\$52.50	
Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$8.75	