

A13000000280

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(City/State/Zip/Phone #)

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JAN 5 2023

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FEB 07 2023

M. SOLOMON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 1809 Brickell, LP
Name of Florida Limited Partnership or Limited Liability Limited Partnership

The enclosed Certificate of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Craig Thompson

Contact Person

Integra Solutions, LLC

Firm/Company

150 SE 2nd Ave., Suite 800

Address

Miami, FL 33131

City, State and Zip Code

legal@integrafl.com

E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

Craig Thompson at (305) 774-0110

Name of Contact Person Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

- \$52.50 Filing Fee
 \$61.25 Filing Fee and Certificate of Status
 \$105.00 Filing Fee and Certified Copy
 \$113.75 Filing Fee, Certified Copy, and Certificate of Status

Mailing Address:
 Registration Section
 Division of Corporations
 P.O. Box 6327
 Tallahassee, FL 32314

Street Address:
 Registration Section
 Division of Corporations
 The Centre of Tallahassee
 2415 N. Monroe Street, Suite 810
 Tallahassee, FL 32303

**CERTIFICATE OF AMENDMENT
TO
CERTIFICATE OF LIMITED PARTNERSHIP
OF**

1809 Brickell, LP

Insert name currently on file with Florida Department of State

Pursuant to the provisions of section 620.1202, Florida Statutes, this Florida limited partnership or limited liability limited partnership, whose certificate was filed with the Florida Department of State on May 28, 2013, assigned Florida document number Λ13000000280, adopts the following certificate of amendment to its certificate of limited partnership.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited partnership or limited liability limited partnership here:

New name must be distinguishable and contain an acceptable suffix.

Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.

Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.

B. If amending mailing address and/or principal office address, enter new mailing address and/or principal office address here:

New Principal Office Address:
(Must be STREET address)

Integra Solutions, LLC
150 SE 2nd Ave., Suite 800
Miami, FL 33131

New Mailing Address:
(May be post office box)

Integra Solutions, LLC
150 SE 2nd Ave., Suite 800
Miami, FL 33131

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C. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Integra Solutions, LLC

New Registered Office Address:

150 SE 2nd Ave., Suite 800

Enter Florida street address

Miami, Florida 33131

City

Zip Code

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.

Paulo Melo
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>	<u>Address</u>	<u>Type of Action</u>
<u>General Partner</u>	<u>Integra Solutions, LLC</u>	<u>150 SE 2nd Ave., Suite 800</u> <u>Miami, FL 33131</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
	<u>EHDOC Stanley Avrod Tower Charitable Corp</u>	<u>1580 Sawgrass Corporate Parkway</u> <u>Suite 210</u> <u>Ft. Lauderdale, FL 33323</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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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."
- 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.)

F. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Paulo Tavares de Melo is appointed as Vice President of 1809 Brickell. LP and is authorized to sign on its behalf.

Effective date, if other than the date of filing: _____
(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Signature(s) of a general partner or all general partners*:

(*NOTE: Only one current general partner is required to sign this document unless the limited partnership is adding or removing a "limited liability limited partnership" election statement. Chapter 620, F.S., requires all general partners to sign when adding or removing a "limited liability limited partnership" election statement.)

Paulo Melo
Paulo Melo, as Manager of Integra Solutions, LLC, a Florida limited liability company, as new general partner

Melanie Ribeiro
Melanie Ribeiro, as Vice President of EHDOD Stanley Axlrod Tower Charitable Corp, a Florida not-for-profit corporation, as withdrawing partner

Signature(s) of all new or dissociating general partner(s), if any:

Paulo Melo
Paulo Melo, as Manager of Integra Solutions, LLC, a Florida limited liability company, as new general partner

Melanie Ribeiro
Melanie Ribeiro, as Vice President of EHDOD Stanley Axlrod Tower Charitable Corp, a Florida not-for-profit corporation, as withdrawing partner

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STATE OF FLORIDA

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