

MAY 31 2019



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 30, 2019

FLORIDA RESEARCH & FILING SERVICES, INC.

SUBJECT: SUMMER CROSSING, LLLP
Ref. Number: A10000000081

We have received your document for SUMMER CROSSING, LLLP and your check(s) totaling \$77.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

There is a balance due of \$27.50.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Scott
Regulatory Specialist II

Letter Number: 419A00010786

FILED

2019 MAY 29 A 3:22

RECEIVED
DIVISION OF STATE

19 MAY 30 PM 2:01

RECEIVED
DIVISION OF STATE

RE-SUBMITTING
W/ CORRECTIONS
PLEASE RETAIN
ORIGINAL SUBMISSION
DATE 5/29/19

FLORIDA RESEARCH & FILING SERVICES, INC.

1211 CIRCLE DR

TALLAHASSEE, FL 32301

PH: 850-524-4381

PLEASE FILE THE ATTACHED AMENDMENT FOR:

SUMMER CROSSING, LLLP

PLEASE RETURN A CERTIFIED COPY

CK# 8240 FOR \$77.50

THANK YOU!

FILED
2018 MAY 29 A 3:22
TALLAHASSEE, FL 32301

SUMMER CROSSING, LLLP

Page 1 of 3

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>	<u>Address</u>	<u>Type of Action</u>
	SUMMER CROSSING LLC	c/o 8950 SW 74th Ct. Suite 1901 Miami, FL 33156	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
	ALFREDO A. CAPOTE	c/o 8950 SW 74th Ct. Suite 1901 Miami, FL 33156	<input checked="" 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
			<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.)*

N/A

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)

SUMMER CROSSING LLC, General Partner

By: ALFREDO A. CAPOTE, Manager

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

ALFREDO A. CAPOTE, General Partner

SUMMER CROSSING LLC, General Partner

By: ALFREDO A. CAPOTE, Manager

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