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D. BRUCE
D. BRUCE
EXAMINER

COVER LETTER

10:	Division of	Section Corporations						
SUBJ	ECT:	Lyon	s Corporate P	ark, L	LLP			
		ame of Florida Limited	Partnership or Limite	d Liabili	ty Limited Partr	nership		
The en	nclosed Certif	icate of Amendmen	t and fee(s) are sul	bmitted	l for filing.			
Please	e return all cor	respondence concer	ming this matter to) :				
		David Lasser						
		Contact Person						
	Lyon	s Corporate Park,	LLLP					
		Firm/Company						
	6601	Lyons Road, Suite	e C - 1					
		Address				7		
	Coo	onut Creek, FL 3	3073					
		City, State and Zip Cod		_		AH		ť
	dav	idlasser@hotmail	.com			ASSE ANN	1 JUL 12	
E	-mail address: (to	be used for future ann	ual report notification)		in Ch		
						10 1.S	(25)	
For fu	rther informat	ion concerning this	matter, please call	l :		F STATE		
	Davi	d Lasser	at (305	`	510-03		•	
	Name of Conta			and Day	time Telephone			
Enclos	sed is a check	for the following ar						
\$52.	.50 Filing Fee	\$61.25 Filing Fee and Certificate of Status	\$105.00 Filing and Certified C		\$113.75 F Certified Co Certificate o	py, and		
STRE	ET ADDRES	SS:	MAI	LING	ADDRESS:			
	tration Section		Regis	stration	Section			
	on of Corpora	tions			Corporations			
5				Box 6327				
	executive Centassee, FL 323		I alla	nassee,	FL 32314			
- unull								

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

Lyons Corp	orate Park, L	LLP
Insert name currently on fi	le with Florida Dep	artment of State
Pursuant to the provisions of section 620.1202, F limited liability limited partnership, whose certifity 7/14/2000, assigned Floadopts the following certificate of amendment to	cate was filed w rida document n	ith the Florida Department of State on umberA0000001107,
	its certificate of	minted partnership.
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the l here:	<u>imited partnersh</u>	ip or limited liability limited partnership
nere .		
New name must be distinguish	nable and contain an	acceptable suffix.
Acceptable Limited Partnership suffixes: Limited Partnersh	hin Limited LP 1	P or Ltd
Acceptable Limited Liability Limited Partnership suffixes:		
B. If amending mailing address and/or principal office address here:	pal office addre	ss, enter new mailing address and/or
New Principal Office Address:		
(Must be STREET address)		7
	-	AAR J
New Mailing Address:		ASS
(May be post office box)		MC -
		77 = [7]
C. If amending the registered agent and/or registered	ered office addre	SS on our records. Enter the name of the
new registered agent and/or the new registered offic	e address here:	<u> </u>
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Fl	orida street address
 		, Florida
	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 a
am familiar with and accept the obligations of my position as registered agent.

If Changing Regi	stered 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>	Type of Action
<u>Partner</u>	Michele Ferrera, Truster	6601 Lyons Road Suite C - 1 Coconut Creek, FL 33073	☐ Add ✓ Remove
Partner	Diane Rolfe. Trustee of the Michele Forcere Trust	6601 Lyons Road Suite C - 1 Coconut Creek, FL 33073	✓ Add ☐ Remove
			Remove Add Remove FAdd Remove Remove
			☐Add ☐Remove

E. If the limited partnership or limited liability limited partnership is amending its "limited liability limited partnership" status, enter change here:

L	This Limited Partnership hereby elects to be a "Limited Liability Limited Partnership."
Ċ	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 ad	ditional sheets, if necessary.)
		,	
Effective date, if other than the date of filin (Effective date cannot be prior to nor more than 90 State.)	ig: days after the da	te this document is j	filed by the Florida Department of
Signature(s) of a general partner or all g	eneral partne	ers*:	
(*NOTE: Only one current general partner is requiremoving a "limited liability limited partnership" el when adding or removing a "limited liability limited"	ection statement.	Chapter 620, F.S.,	limited partnership is adding or requires all general partners to sign
Augustine Ferrera, Trustee			
Signature(s) of all new or dissociating ge	<u>neral partner</u>	(s), if any:	
Diane Belke			 .
Diane Rotte, Trustal of the Michael Fe	Mera Trust		ALLA ALLA
			TAR ASS
			SEE OF E
			STA P
Filing Fee: \$52.50			DA III
Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75			