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(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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J. HARRIS

COVER LETTER

Division of	Section Corporations		
SUBJECT: CINDERELLA HOLDINGS, LLLP			
N:	ame of Florida Limited Pa	rtnership or Limited Liabil	ity Limited Partnership
The enclosed Certif	icate of Amendment a	nd fee(s) are submitte	d for filing.
Please return all cor	respondence concerni	ng this matter to:	
CAROL	. ANNE JOHNSON,	ESQ.	
	Contact Person		
CAROL J	OHNSON LAW FIR	M, P.A.	
	Firm/Company		
	P.O. BOX 47306		
	Address	· · · · · · · · · · · · · · · · · · ·	
ST PETE	RSBURG, FLORID	A 33743	
	City, State and Zip Code	7100740	
CAROL@	CAROLJOHNSONL	AW.COM	
	be used for future annual		
For further informat	ion concerning this m	atter, please call:	
Carol Anne	Johnson, Esq.	at (727)	647-6645
Name of Conta			ytime Telephone Number
Enclosed is a check	for the following amo	unt:	
\$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
STREET ADDRES	SS:		ADDRESS:
Registration Section		Registration	
Division of Corpora	tions		Corporations
	Clifton Building P. O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314		
Tallahassee, FL 323		rananassee	5, FL 32314

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

		HOLDINGS, LI e with Florida Departm			
Pursuant to the provisions of section 620.1 limited liability limited partnership, whose December 26, 2000, assignadopts the following certificate of amendments.	e certific ned Flo	cate was filed with t rida document numb	he Florida De per <u>A(</u>	epartment of Sta 00000002010	
This amendment is submitted to amend the foll	lowing:				
A. If amending name, <u>enter the new name</u> <u>here</u> :	of the li	mited partnership o	r limited liabi	ility limited parti	<u>1ership</u>
New name must be di	stinguish	able and contain an acco	eptable suffix.		
Acceptable Limited Partnership suffixes: Limited I Acceptable Limited Liability Limited Partnership s B. If amending mailing address and/or principal office address here:	uffixes: I	Limited Liability Limited	l Partnership, L		ınd/or
New Principal Office Addre (Must be STREET address)	<u>:ss:</u>	737 E. 52nd Stre Hialeah, Florida 3		5 J.	
New Mailing Address: (May be post office box)		same as above		65. 6	EBO
C. If amending the registered agent and/or			1 our records	S, enter the name	of the
Name of New Registered Agent:		west Registered A	gent, LLC		
New Registered Office Address:	3030 N. Rocky Point Dr. Ste. 150A Enter Florida street address				
		Tampa City	, Florida _	33607 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.

removed from our records: le Name	Address	Type of Action
Jose M. Vila, TTEE	5730 West 12th Lane Hialeah, FL 33012	Add Remove
Osvaldo R. Vila, TTEE	737 E. 52nd Street Hialeah, Florida 33013	
Daniel D. Vila, TTEE	737 E. 52nd Street Hialeah, Florida 33013	Add Remove
	-	Add
		Add Remove
		Remove

F. If amending any other information, ent	er change(s) here: (Attach additional sheets, if necessary.)
Removing as GP Jose M. Vila, Sr., Truste	ee of the Jose M. Vila Revocable Trust - deceased
Adding as GP Osvaldo Ruben Vila, Truste	ee of the Osvaldo Ruben Vila Irrevocable Trust
Adding as GP Daniel Domingo Vila, Trusto	ee of the Daniel Domingo Vila Irrevocable Trust
Effective date, if other than the date of filing: (Effective date cannot be prior to nor more than 90 day State.)	vs after the date this document is filed by the Florida Department of
Signature(s) of a general partner or all gene	eral partners*:
(*NOTE: Only one current general partner is required removing a "limited liability limited partnership" election when adding or removing a "limited liability limited partnership" election when adding or removing a "limited liability limited partnership" election when adding or removing a "limited liability limited partnership" election when adding or removing a "limited liability limited partnership" election when adding or removing a "limited liability limited partnership" election when adding or removing a "limited liability limited liability limited partnership" election when adding or removing a "limited liability limited partnership" election when adding or removing a "limited liability limited liability limited partnership" election when adding or removing a "limited liability limited" partnership" election when adding or removing a "limited liability limited" partnership" election when adding or removing a "limited liability limited" partnership" election when adding or removing a "limited liability limited" partnership and the partnership and the partnership" election when adding the partnership and t	to sign this document unless the limited partnership is adding or ion statement. Chapter 620, F.S., requires all general partners to sign artnership" election statement.)
Signature(s) of all new or dissociating gener Jose M. Vila, Sr deceased Daniel Domingo Vila, TTEE	osvaldo Ruben VIII TTEE
Filing Fee: \$52.50 Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75	FILED 15 JUL -8 PM 3: 55 SECTION OF STATE FALLAHASSEE, FLORIDA