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## COVER LETTER

TO: Registration Division of C	Section Corporations		
Three H	orizons Condominium. Ltc	1	
SUBJECT:		tnership or Limited Liabilit	y Limited Partnership
The enclosed Certif	icate of Amendment a	nd fee(s) are submitted	for filing.
Please return all cor	respondence concernii	ng this matter to:	
Rainey S. Rissman			
	Contact Person		
Three Horizons condon	ninium, Ltd		
	Firm Company		
6768 Wild Orchid Trl			
	Address	<del>-</del>	
Lake Worth, FL 3349			· 6:
<del></del>	City, State and Zip Code		一
raineyr44@gmail.com			
E-mail address: (to	be used for future annual	report notification)	明年77
For further informat	ion concerning this ma	atter, please call;	7083
Rainey S. Rissman		at () 4447	083
Name of Conta	act Person		time Telephone Number
Enclosed is a check	for the following amo	unt:	
S52.50 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	88:	MAILING A	ADDRESS:
Registration Section		Registration Section	
Division of Corpora	itions	Division of C	
Clifton Building 2661 Executive Center Circle		P. O. Box 63 Tallahassee.	
Tallahassee, FL 32.		r arianassee.	11, 2214

## CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

Three Horizons Condominium, Ltd		
Insert name currently on f	ile with Florida Depa	ortment of State
Pursuant to the provisions of section 620,1202, Elimited liability limited partnership, whose certifold 02/07/1969 adopts the following certificate of amendment to	icate was filed wi orida document n	th the Florida Department of State on umber A01072
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the here</u> :	limited partnersh	ip or limited liability limited partnership
New name must be distinguis	hable and contain an	acceptable suffix.
Acceptable Limited Partnership suffixes: Limited Partners 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: (Musi bu STREET address)		
New Mailing Address: (May be post office box)		137 to
C. If amending the registered agent and/or regist new registered agent and/or the new registered offi		ss on our records, <u>enter the name of the</u>
Name of New Registered Agent:		
New Registered Office Address:	Enter Flo	rida street address
		Florida
	Cuv	Zip Code

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

Thereby 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
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>	Name	Address	Type of Action
Mr	Sanford Rissman	1552 SW 151 Ave Pembroke Pines, FL 33027	□ Add □ ■ Remove
			☐ Add ☐ Remove
			— Add II
			O Remove
<del></del>			☐ 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."
- 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)

Effective date, if other than the date of filing: (Effective date cannot be prior to nor more than 90 days after State.)	r the date this document is filed by the Florida Department of
Note: If the date inserted in this block does not meet the app	licable statutory filing requirements, this date will not
he 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 removing a "limited liability limited partnership" election str	gn this document unless the limited partnership is adding or atement. Chapter 620, F.S., requires all general partners to sign
when adding or removing a "limited liability limited partners	ship" election statement.)
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Signature(s) of all new or dissociating general p	artner(s), if any: ين مورد المعالمة المعالمة المعالمة المعالمة المعالمة المعالمة المعالمة المعالمة المعالمة الم
,	
Filing Fee: S52.50 Certified Copy (optional): S52.50	