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(Cit	ty/State/Zip/Phone	<b>⇒</b> #)
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D. SCOTT 0CT 1 1 2017

## **COVER LETTER**

TO: Registration Division of	Section Corporations			
CHRISCIE THEN	O EXIT LIMITED PARTN	PERSHIP		
SUBJECT: N	lame of Florida Limited Par	tnership or Limited Liabilit	y Limited Partnership	_
m l to di	C	nd Carda) and automitted	Con filing	
The enclosed Certif	icate of Amendment a	nd fee(s) are submitted	for ming.	
Please return all co	rrespondence concerni	ng this matter to:		
PIER GUIDUGLI				
	Contact Person			
THE NO EXIT LIMIT	ED PARTNERSHIP			
	Firm/Company			
4801 NE 26TH AVE				
	Address			
FT LAUDERDALE F	°L 33308			
	City. State and Zip Code			
LEOGUI@AOL.COM	4			
E-mail address: (	to be used for future annual	report notification)		
For further informa	tion concerning this m	atter, please call:		
PIER GUIDUGLI		at ( 561 866 3963)		
Name of Con	tact Person		time 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	S113.75 Filing Fee. Certified Copy, and Certificate of Status	
STREET ADDRE		MAILING A		
Registration Section		Registration	Section 🔀 🖺	
Division of Corpor Clifton Building	ations	P. O. Box 63	_ · · · · · · · · · -	•
2661 Executive Ce			FL 32314돐 = = =	-
Tallahassee, FL 32	2301		10 10	ī
			[S] [S]	C

## CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

THE NO EXIT LIMITED PARTNERS	<u>НПР</u>	<u> </u>			<del>_</del>
Insert name curre	ntly on fil	e with Florida Department	of State		
Pursuant to the provisions of section 620. limited liability limited partnership, whos 01 18 2002 adopts the following certificate of amenda	e certific ned Flo	cate was filed with the rida document number	Florida Depa A02000000084	rtment of	
This amendment is submitted to amend the fol	lowing:				
A. If amending name, enter the new name here:	of the li	<u>mited partnership or li</u>	mited liability	limited p	<u>artnership</u>
New name must be d	istinguish	able and contain an accept	able suffix.		<del>.</del>
Acceptable Limited Partnership suffixes: Limited Acceptable Limited Liability Limited Partnership	Partnersh suffixes: l	iip, Limited, L.P., LP, or L Limited Liability Limited P	 d. urtnership, L.L.I.	L.P. or LLL	Р.
B. If amending mailing address and/or principal office address here:	· princip	oal office address, <u>ent</u>	er new maili	ng addre	ss and/or
New Principal Office Address) (Must be STREET address)	<u> 288:</u>	4801 NE 26TH AVE FT LAUDERDALE FL	33308		_ _ _
New Mailing Address: (May be post office box)		4801 NE 26TH AVE FT LAUDERDALE FL	33308		_ _
C. If amending the registered agent and/onew registered agent and/or the new registered agent and/or the new registered Agent:  Name of New Registered Agent:  New Registered Office Address:	red offic		TALLIAHA	2817 001	
	FT LA	Enter Florida's UDERDALE City	Florida 3330	08 T Codes	т П

## 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.

<u> Fitle</u>	<u>Name</u>	<u>Address</u>	Type of Action
	MILANO BROTHERS INTL C	1456 NEWPORT CENTER DR	□ Add
	CORPORATION	DEERFIELD BEACH FLORIDA 33442	Remove
	THE ROBERT P MILANO LIV	4801 NE 26TH AVE	
	LIVING TRUIT	FL 333.08	□ Remove
<u>-</u>			_ □ Add □ Remove
<del></del>			□ Add □ Remove
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			- 105 - 105
the limited	d partnership or limited liability	v limited partnership is amen	nding its "limited li

F. If amending any other infor	mation, enter change(s	   here: (Attach additi	onal sheets, if nec	essary.)
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			<del>.</del>	<del></del>
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Effective date, if other than the date	of filing:	110	7.117	
(Effective date cannot be prior to nor more State.)	e than 90 days after the do	te this document is filed	by the Florida De	
<b>Note:</b> If the date inserted in this block doe be listed as the document's effective date of	s not meet the applicable s	tatutory filing requirem	ents, this date will	not
be fisted as the document's effective date (	on the Department of State	s records.		
Signature(s) of a general partner	or all general partne	ers*:		
(*NOTE: Only one current general partne	er is required to sign this d	ocument unless the lim	ited partnership is a	dding or
removing a "limited liability limited partners, when adding or removing a "limited liability limited liability l	ership" election statement.	Chapter 620, F.S., req	uires all general pa	rtners to sign
when adding or removing a minied habin	ny minted partnership ere	etion statement.		
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		N.		
	<del></del>	,		
Signature(s) of all new or dissocia	iting general partner	(s), if any:		
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Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$8.75		<u>ال</u>	
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