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J. BRYAN

MAY - 9 2008

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations

Tallahassee, FL 32301

SUBJECT: ORSHAN, LITHMAN, SEIDEN, RAMOS, HATTON & HUESMANN, LLLP

(Name of Florida Limited Partnership or Limited Liability Limited Partnership)

The enclosed Certificate of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

David Hatton			
	(Contact Person)		c
ORSHAN, LITHM	AN, et. al.		G
	(Firm/Company)		,
150 Alhambra Circ	cle, Suite 1150		` '
	(Address)		·
Coral Gables, Flor	rida 33134		
	(City, State and Zip Code)		
David Hatton	tion concerning this m	_at (_305) 858	8-0220
(Name of Con	tact Person)	(Area Code and D	Paytime Telephone Number)
Enclosed is a check	for the following amo	ount:	
\$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 ADDRESS:		MAILING	ADDRESS:
Registration Section		Registration Section	
Division of Corporations		Division of Corporations	
Clifton Building		P. O. Box 6327	
2661 Executive Cer	nter Circle	Tallahassee,	FL 32314

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

OB MAY -8 AM 11: 25

ORSHAN, LITHMAN, SEIDEN, RAMOS, HATTON & HUESMANN, LLLP

(Insert name currently on file with Florida Department of State)

	icate was filed w	
limited partnership.		
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the l</u> here:	imited partnersh	nip or limited liability limited partnership
ORSHAN, LITHMAN, SEIDEN, RAMOS, HA	TTON HUES	MANN & FAJARDO LLI P
(New name must be distinguish		
Acceptable Limited Partnership suffixes: Limited Partnersh Acceptable Limited Liability Limited Partnership suffixes:		
B. If amending the registered agent and/or registoner new registered agent and/or the new registered office		ess on our records, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:		
New Registered Office Address.	(Enter Florida street address)	
	·	,
	(City)	, Florida (Zip Code)
New Desigtered Assetts Signature if shousing	- Domintound As	no4.
New Registered Agent's Signature, if changing	Registered Ag	<u>tent:</u>
I hereby accept the appointment as registered agen comply with the provisions of all statutes relative to am familiar with and accept the obligations of my p	o the proper and	complete performance of my duties, and I
	(If Changing Regi	stered Agent, Signature of New Registered Agent)

<u> Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			Add Remove
			AddRemove
			Add Remove Add Remove
			Damarra
			☐ Add Remove
	l partnership or limited li hip" status, enter change l	ability limited partnership is	Remove Add Remove
		o be a "Limited Liability Limite	•
		es its "Limited Liability Limited	_
TE: If adding	or removing" limited liability lin	nited partnership" status, all genera	l partners must sign this ame
	ny other information, enter	change(s) here: (Attach addition	al sheets, if necessary.)

1 ma			
Effective date, if other than the date (Effective date cannot be prior to nor more	of filing:		
(Effective date cannot be prior to nor more State.)	than 90 days after the da	te this document is filed by the l	Torida Department of
Signature(s) of a general partner of	or all general partne	ers*:	
(*NOTE: Only one current general partner removing a "limited liability limited partner	ship" election statement.	Chapter 620, F.S., requires all	
when adding or removing a "limited liability	y limited partnership" ele	ection statement.)	
ROBERT ORSHAN, MANAGE			
ROBERT ORSHAN, MANAGE	R.		
		-	
	·		
		 	
Signature(s) of all new or dissociat	ting general partner	(s), if any:	
•			
			
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