

**A02000000972**

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

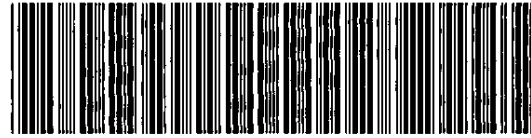
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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**300184060223**

300184060223  
08/18/10--01013--009 \*\*61.25

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2010 AUG 18 AM 11:49  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

C. LEWIS  
AUG 19 2010  
EXAMINER

**GUTTENMACHER & BOHATCH, P.A.**

ATTORNEYS AT LAW

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PLEASE REPLY TO:  
SOUTH MIAMI

August 16, 2010

VIA U.S. CERTIFIED MAIL

Florida Department of State  
Division of Corporation  
P.O. Box 6327  
Tallahassee, Florida 32314

**RE: Rossi Family Limited Partnership**

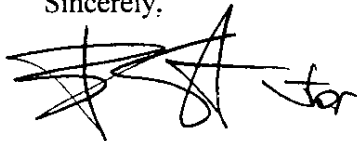
To Whom It May Concern:

Attached please find the Certificate of Amendment to Certificate of Limited Partnership of Rossi Family Limited Partnership and a check in the amount of \$61.25 to process the amendment of the above mentioned entity. Once the amendment is processed please send me a Certificate of Status in the stamped enclosed self-addressed envelope provided for your convenience.

I have also enclosed a copy of this letter. Please have it date-stamped and return it to me in the second stamped self-addressed envelope provided for your convenience.

Please feel free to contact me should you have any questions.

Sincerely,



Edward P. Guttenmacher, Esq.

EPG/kgs  
Encl.

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CERTIFICATE OF AMENDMENT  
TO  
CERTIFICATE OF LIMITED PARTNERSHIP  
OF**

**Rossi Family Limited Partnership**

Insert name currently on file with Florida Department of State

Pursuant to the provisions of section 620.1202, Florida Statutes, this Florida limited partnership or limited liability limited partnership, whose certificate was filed with the Florida Department of State on July 18, 2002, assigned Florida document number A02000000972, adopts the following certificate of amendment to its certificate of limited partnership.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited partnership or limited liability limited partnership here:**

Rossi Family LLLP

New name must be distinguishable and contain an acceptable suffix.

*Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.*

*Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.*

**B. If amending mailing address and/or principal office address, enter new mailing address and/or principal office address here:**

New Principal Office Address: N/A  
*(Must be STREET address)*

New Mailing Address: N/A  
*(May be post office box)*

**C. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent: G B & B Registries, LLC

New Registered Office Address: 7301 SW 57th Court, Suite 560  
*Enter Florida street address*

South Miami, Florida 33143  
*City Zip Code*

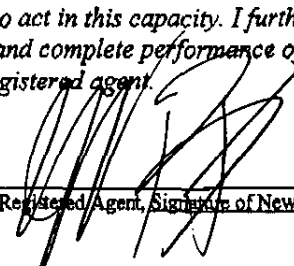
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**New Registered Agent's Signature, if changing Registered Agent:**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*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.*



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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	N/A	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> 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.)**

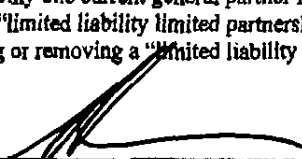
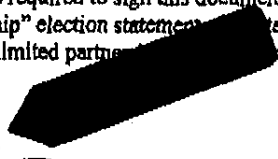
F. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Four horizontal lines for amending information.

Effective date, if other than the date of filing: \_\_\_\_\_  
(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

**Signature(s) of a general partner or all general partners\*:**

(\*NOTE: Only one current general partner is required to sign this document unless the limited partnership is adding or removing a "limited liability limited partnership" election statement. Chapter 620, F.S., requires all general partners to sign when adding or removing a "limited liability limited partnership" election statement.)

By Mark Rossi, President of  
M & M Enterprises of The Florida  
Keys, Inc., General Partner

**Signature(s) of all new or dissociating general partner(s), if any:**

Four horizontal lines for new or dissociating general partner signatures.

Filing Fee: \$52.50  
Certified Copy (optional): \$52.50  
Certificate of Status (optional): \$8.75

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