## 8975000050A

(Requestor's Name)				
(Address)				
(Address)				
. (Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to	Filing Officer:			
<u></u>				

Office Use Only

G. MCLEOD

SEP 22 2010

EXAMINER



000185461920

09/21/10--01024--022 \*\*52.50

FILED

10 SEP 21 PM 1:36

SLCRETARY OF STATE
ALLAHASSEE, FIORIA

## COVER LETTER

TO: Registration Section Division of Corporations	·
SUBJECT:	IPG 216th Street, LLLP
	ed Partnership or Limited Liability Limited Partnership
The enclosed Certificate of Amendm	ent and fee(s) are submitted for filing.
Please return all correspondence cond	cerning this matter to:
Giorgio Vallar, E	sq
MPG 216th Street, Firm/Company	LLLP
1803 Briar Creek	Blvd.
Address	
Safety Harbor, FL	
City, State and Zip C	Code
E-mail address: (to be used for future a	nnual report notification)
For further information concerning the	nis matter, please call:
Ciargia Valley For	660 7440
Giorgio Vallar, Esq Name of Contact Person	at ( 727 ) 669-7412  Area Code and Daytime Telephone Number
	·
Enclosed is a check for the following	gamount:
\$52.50 Filing Fee S61.25 Filing 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 Center Circle	Tallahassee, FL 32314
Tallahassee, FL 32301	

## CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

MP	G 216	oth Street, Ltd.			
		e with Florida Department	t of State		
Pursuant to the provisions of section 620. Ilmited liability limited partnership, whose May 14, 2003, assig adopts the following certificate of amendr	e certifi ned Flo	cate was filed with the rida document numbe	Florida DerA	epartment of S 0000000798	tate on
This amendment is submitted to amend the following	lowing:				
A. If amending name, enter the new name here:	of the l	imited partnership or l	imited liabi	lity limited par	<u>rtnership</u>
New name must be di	istinguish	nable and contain an accep	table suffix.		<del></del>
Acceptable Limited Partnership suffixes: Limited Acceptable Limited Liability Limited Partnership.				L.L.P. or LLLP.	
B. If amending mailing address and/or principal office address here:	·princi	pal office address, <u>en</u>	ter new m	ailing address	s and/or
New Principal Office Address) (Must be STREET address)	<del>ess:</del>	1803 Briar Creek B Safety Harbor, FL		SECRE AK	10 SEP 21
New Mailing Address: (May be post office box)		1803 Briar Creek I Safety Harbor, FL	34695	Y OF STAT	PH :: 3
C. If amending the registered agent and/o new registered agent and/or the new registered			our records	s, enter the nai	me of the
Name of New Registered Agent:	Giorg	gio Vallar, Esq			
New Registered Office Address: 1803 Briar Creek Blvd.  Enter Florida street address		7			
		Safety Harbor		34695	
		City	, Florida_	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.

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>	Type of Action
	NGP 216th Street, Inc.	625 Court Street Clearwater, FL 33756	_ Add ✓ Remove
	MPG 216th Street. Inc.	1803 Briar Creek Blvd. Safety Harbor, FL 34695	Add Remove
			Add Remove
			Add Remove
	-	4.65	Add Remove
			Add Remove
	partnership or limited liabili nip" status, enter change here:	ty limited partnership is amen	— iding its "limited liability
This Limite	ed Partnership hereby elects to b	e a "Limited Liability Limited P	artnership."
This Limite	d Partnership hereby removes it	ts "Limited Liability Limited Par	rtnershin" status.

(NOTE: If adding or removing" limited liability limited partnership" status, all general partners must sign this amendment.)

F. If amending any other informa	tion, enter change(s) here: (Attach additional sheets, if necessary.)
Mark Control of the C	
Effective date, if other than the date o	f filing:
(Effective date cannot be prior to nor more th State.)	an 90 days after the date this document is filed by the Florida Department of
Signature(s) of a general partner or	all general partners*:
(*NOTE: Only one current general partner is removing a "limited liability limited partners! when adding or removing a "limited liability	s required to sign this document unless the limited partnership is adding or hip" election statement. Chapter 620, F.S., requires all general partners to sign limited partnership" election statement.)
Sh_	
	<u> </u>
Signature(s) of all new or dissociati	ng general partner(s), if any:
<del>M</del>	
Certified Copy (optional): \$5	52.50 52.50 \$8.75