# A13000001348

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EXAMINER



## FLORIDA DEPARTMENT OF STATE Division of Corporations

January 11, 2012

KAREN DORSEY WEST TENN APPLEYARD ASSOCIATES LTD 1100 S POWERLINE ROAD, #220 DEERFIELD BEACH, FL 33442

SUBJECT: THE ROBERT D. GROSSMAN FAMILY LIMITED PARTNERSHIP

Ref. Number: A03000001348

We have received your document for THE ROBERT D. GROSSMAN FAMILY LIMITED PARTNERSHIP and your check(s) totaling \$75.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

The fee to file your document is \$52.50. An additional \$52.50 is due for each certified copy requested and an additional \$8.75 is due for each certificate of status requested.

There is a balance due of \$27.50.

The effective date must be specific and cannot be prior to the date of filing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6984.

Deborah Bruce Regulatory Specialist II

Letter Number: 812A00000779

#### **COVER LETTER**

Registration Section Division of Corporations

TO:

SUBJECT: Robert D Grosena Family Hd Partnership  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:	
Contact Person	
Contact/Person	
Robert D. Grossman Family Lite Partnership Firm/Company	
1100 S. Powerline Rd #220 Address	
Address	
Deerfield Beach, ML 33442  City, State and Zip Code	İ
City, State and Zip Code	-
Ascundustrice anail. Con  E-mail address: (to be used for future annual report notification)	1
For further information concerning this matter, please call:	•
Karen Dorsey at ( 305 ) 895-7600	
Name of Contact Person Area Code and Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$52.50 Filing Fee S61.25 Filing Fee and Certificate of Status S105.00 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 The second of the second o	
Tallahassee, FL 32314  Tallahassee, FL 32301	

### CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP

Kobert D. Grossi			. Partnership
Insert name curr	ently on fi	le with Florida Departmer	at of State
Pursuant to the provisions of section 620 limited liability limited partnership, who A0300001348, assi adopts the following certificate of amend	se certifi gned Flo	cate was filed with the rida document number	e Florida Department of State on
This amendment is submitted to amend the fo	llowing:		
A. If amending name, enter the new nam here:	e of the I	imited partnership or	limited liability limited partnership
New name must be	listinguish	able and contain an accep	table suffix.
Acceptable Limited Partnership suffixes: Limited Acceptable Limited Liability Limited Partnership			
B. If amending mailing address and/o principal office address here:	r princi <sub>l</sub>	oal office address, <u>en</u>	ter new mailing address and/or
New Principal Office Address)  (Must be STREET address)	ess:	Unios. Paverl Deerhey Bea	1 Rd #250 1 7 22 7 23 7 25 7 25 7
New Mailing Address: (May be post office box)		NOO S. Power	ine R1 #200 € IT
C. If amending the registered agent and/onew registered agent and/or the new registered			our records, enter the name of the
Name of New Registered Agent:	Bra	3	
New Registered Office Address:	1/00	S. Powerline (	26#220
	Decrt	reld Beach	_, Florida33442_
		City	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>	Address	Type of Action
Gen Part.	Robert Grossman	12700 Biscayne Blad N Miam, FL 33180	Add Remove
Gen Part	BRG Property Managements UK 111000135789	1100 S. Powerline Rd & Deerfield Beach FL 33442	Add Remove
	H1000133707		Add Remove
			Add: A 7
			☐ Add
			Add Remove
E. If the limited limited partnershi	partnership or limited liability ip" status, enter change here:	limited partnership is amend	ing its "limited liability
	d Partnership hereby elects to be	a "Limited Liability Limited Par	tnership."

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

This Limited Partnership hereby removes its "Limited Liability Limited Partnership" status.

F. If amending any other information, enter change(s)	here: (Attach addition	nal sheets, if	necess	ary.)
		<u></u>		
•				
Effective date, if other than the date of filing:	this document is filed b	by the Florida	Depart	tment of
Signature(s) of a general partner or all general partner	S <b>*:</b>	٠		
(*NOTE: Only one current general partner is required to sign this doc removing a "limited liability limited partnership" election statement. When adding or removing a "limited liability limited partnership" elections.	cument unless the limite Chapter 620, F.S., requi	ed partnership res all general	is addi partne	ng or rs to sign
+ Baw May				
	- 400		12,	
		HAS	JAN 2	11
Signature(s) of all new or dissociating general partner(s	i), if any:	RES. FLOR	3 AM 8: (	LED
+ Jan Ala			<u>6</u>	
Filing Fee: \$52.50 Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75			•	