

A030000001553

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

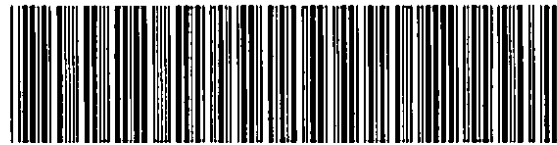
(Document Number)

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Certificates of Status \_\_\_\_\_

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FILED  
2017 AUG - 7 PM 2:00  
STATE OF MISSISSIPPI  
TALLAHASSEE, FLORIDA

AUG 10 2017  
J. HARRIS

**STEVEN A. SCIARRETTA, P.A.**

ATTORNEYS AT LAW

STEVEN A. SCIARRETTA

LL.M. IN TAXATION

THE HAMILTON BUILDING  
2799 NW Boca Raton Boulevard, Suite 203  
Boca Raton, Florida 33431  
TELEPHONE: (561) 368-7978  
TOLL FREE: (800) 545-8454  
TELEFAX: (561) 368-8502

Asset Protection  
Business and Taxation Planning  
Probate Administration  
Trusts and Estate Planning

VIA UPS

August 4, 2017

State of Florida  
Department of State  
Registration Section  
Division of Corporations  
2661 Executive Center Circle  
Tallahassee, FL 32301

Re: VECCIA KIDZ

Dear Sir/Madam:

Please find enclosed for filing an Original Article of Amendment to Articles of Organization and an Original Certificate of Amendment to Certificate of Limited partnership, for the above referenced entities.

Also enclosed is our check for \$77.50, made payable to the Florida Department of State, which represents the filing fees for these items.

Please return the completed paperwork to me utilizing the enclosed Pre-paid UPS envelope.

Thank you for your prompt cooperation.

Sincerely,

STEVEN A. SCIARRETTA, P.A.

Steven A. Sciarretta

SAS/dc

Enclosures

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

VECCIA KIDZ FIRST FAMILY LP

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 OCTOBER 27, 2003, assigned Florida document number A03000001553, 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:**

\_\_\_\_\_  
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:

*(Must be STREET address)*

5836 ASHDALE ROAD

LAKE WORTH, FL 33463

New Mailing Address:

*(May be post office box)*

5836 ASHDALE ROAD

LAKE WORTH, FL 33463

**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:

New Registered Office Address:

\_\_\_\_\_  
*Enter Florida street address*

\_\_\_\_\_, Florida

*City*

*Zip Code*

*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.*

**D. If amending the general partner(s), enter the name and business address of each general partner being added or removed from our records:**

[illegible]

2017 AUG - 7 PM 4:09

☒ Add  
☐ Remove

☒ Add  
☐ Remove

☒ Add  
☐ Remove

☐ This Limited Partnership hereby elects to be a "Limited Liability Limited Partnership."

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

Page 2 of 3

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

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.)*

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

**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.)

Veccia Kidz Managemnt LLC

Gaimo Veccia, Mgr

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

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

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STATE OF FLORIDA  
TALLAHASSEE