## A05 0000 1170

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TO ACKNOWLEDGE SUFFICIENCY OF FILING DEPARTMENT OF STATE CORPORATION

B. KOHR

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**EXAMINER** 

DIVISION OF CORPORATION

CORPDIRECT AGENTS, INC. (formerly CCRS) 515 EAST PARK AVENUE TALLAHASSEE, FL 32301 222-1173 FILING COVER SHEET ACCT. #FCA-14 CONTACT: **RICKY SOTO** DATE: 11/02/2010 **REF. #:** 000409.135746.3 CORP. NAME: ONETENPARTNERS LTD. ( ) ARTICLES OF INCORPORATION (XX) ARTICLES OF AMENDMENT ( ) ARTICLES OF DISSOLUTION ( ) ANNUAL REPORT ( ) TRADEMARK/SERVICE MARK ( ) FICTITIOUS NAME ( ) FOREIGN QUALIFICATION ( ) LIMITED PARTNERSHIP ( ) LIMITED LIABILITY ( ) REINSTATEMENT ( ) MERGER ( ) WITHDRAWAL ( ) CERTIFICATE OF CANCELLATION STATE FEES PREPAID WITH CHECK# 537262 FOR \$ 105.00 **AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:** COST LIMIT: \$

(XX) CERTIFIED COPY ( ) CERTIFICATE OF GOOD STANDING ( ) PLAIN STAMPED COPY

( ) CERTIFICATE OF STATUS

PLEASE RETURN:

Examiner's Initials

## TO CERTIFICATE OF LIMITED PARTNERSHIP



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 5 27 205, assigned Florida document number AO 500000 1170,					
adopts the following certificate of amenda	ent to its certificate	of limited partnership.			
This amendment is submitted to amend the following	owing:				
A. If amending name, enter the new name here:	of the limited partner	ship or limited liability lim	lted partnership		
New name must be di	stinguishable and contain	an acceptable suffix.			
Acceptable Limited Partnership suffixes: Limited F Acceptable Limited Liability Limited Partnership s	artnership, Limited, L.P ruffixes: Limited Liability	., LP, or Ltd. Limited Partnership, L.L.L.P. o	or LLLP.		
B. If amending mailing address and/or principal office address here:	principal office add	ress, <u>enter new mailing a</u>	iddress and/or		
New Principal Office Addre (Must be STREET address)	ss:    1100 s	w 93 st. , fi 33176			
New Mailing Address: (May be post office box)	ISON S	w 65 Ten 11, fc 33193			
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:	Manuel A.	Moria	<del></del>		
New Registered Office Address:	New Registered Office Address: 11100 SW 93 ST.  Enter Florida street address				
	Miami	, Florida331	76		
	City	Zip Cod	de		

## 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			
Mr.	James Pensado	12595 SW 137 Aven SUK112 MIRMI, FL 83186	Add Kemove			
Mr.	Jose L. Roces	12595 SW 137 Avery 5 MARKI, FL 33176	LRemove			
	SOMANME LLC	16802 SN 65 Terrace Milamy, F1 33193	Add Remove			
	L10000056206		Add Remove			
			Add Remove			
			Add 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 I	removing" limited llability limited par	tnership" status, all general partne.	rs must sign this amendment.)			

F. If amending any other information, enter change(s	i) vere: (Augen additional sneets, ij necessary.)
Effective date, if other than the date of filing:	
Effective date cannot be prior to nor more than 90 days after the di State.)	ate this document is filed by the Florida Department o
Signature(s) of a general partner or all general partn	ers*:
*NOTE; Only one current general partner is required to sign this removing a "limited liability limited partnership" election statement when adding or removing a "limited liability limited partnership" elections.	t. Chapter 620, F.S., requires all general partners to si
DRUND (N SONANME UC	
MANAGE	
Signature(s) of all new or dissociating general partne	ex(s), if any:
(TI)	
Jose Roces	
JANA James Herrico	
Filing Fee: \$52.50	
Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75	